
State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Filing at a Glance

Company:	Catholic Order of Foresters
Product Name:	FCNH, FCLTC, FCLTC 2000
State:	Pennsylvania
TOI:	LTC03I Individual Long Term Care
Sub-TOI:	LTC03I.001 Qualified
Filing Type:	Rate - M.U. (Medically underwritten)
Date Submitted:	08/31/2021
SERFF Tr Num:	UHAS-132946160
SERFF Status:	Closed-Approved
State Tr Num:	UHAS-132946160
State Status:	Approved
Co Tr Num:	
Effective	
Date Requested:	
Author(s):	Eva Gaber, Michael Blaser, Carolyn Bittner
Reviewer(s):	Sean Carmody (primary), Jim Lavery
Disposition Date:	09/28/2021
Disposition Status:	Approved
Effective Date:	

State Filing Description:

Proposed 39.99% increase on 8 policyholders of individual long term care forms FCNH, FCLTC, and FCLTC 2000.

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

General Information

Project Name: COF LTC Rate Inc 2021 - Gens 1 and 2

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact: 20%

Deemer Date:

Submitted By: Eva Gaber

Status of Filing in Domicile: Authorized

Date Approved in Domicile: 05/11/2021

Domicile Status Comments: Illinois is the state of domicile.

Market Type: Individual

Individual Market Type:

Filing Status Changed: 09/28/2021

State Status Changed: 09/28/2021

Created By: Michael Blaser

Corresponding Filing Tracking Number:

State TOI: LTC03I Individual Long Term Care

Filing Description:

COF LTC Rate Increase Filing

Company and Contact

Filing Contact Information

Eva Gaber, Consulting Actuary

201 West Canton Avenue

Suite 225

Winter Park, FL 32789

EGaber@uhasinc.com

407-622-4533 [Phone]

Filing Company Information

(This filing was made by a third party - unitedhealthactuarialservices)

Catholic Order of Foresters

355 Shuman Blvd.

Naperville, IL 60566-7012

(800) 552-0145 ext. [Phone]

CoCode: 57487

Group Code:

Group Name:

FEIN Number: 36-0879870

State of Domicile: Illinois

Company Type:

State ID Number:

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Filing Fees

State Fees

Fee Required?	Yes
Fee Amount:	\$0.00
Retaliatory?	Yes
Fee Explanation:	The state of domicile (Illinois) does not charge a filing fee for rate filings.

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Sean Carmody	09/28/2021	09/28/2021

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Disapproved	Sean Carmody	09/27/2021	09/27/2021
Disapproved	Sean Carmody	09/08/2021	09/08/2021

Response Letters

Responded By	Created On	Date Submitted
Eva Gaber	09/28/2021	09/28/2021
Eva Gaber	09/21/2021	09/22/2021

SERFF Tracking #:	UHAS-132946160	State Tracking #:	UHAS-132946160	Company Tracking #:	
State:	Pennsylvania	Filing Company:	Catholic Order of Foresters		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified				
Product Name:	FCNH, FCLTC, FCLTC 2000				
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/				

Disposition

Disposition Date: 09/28/2021

Effective Date:

Status: Approved

Comment: Sep 28, 2021

Eva Gaber, Consulting Actuary
Catholic Order of Foresters
201 West Canton Avenue
Suite 225
Winter Park, FL 32789

RE: Proposed 39.99% increase on 8 policyholders of individual long term care forms FCNH, FCLTC, and FCLTC 2000. Pennsylvania Insurance Department ID #: UHAS-132946160

Dear Eva Gaber:

The Department approves a 20% increase on the forms listed above.

Sincerely,

Sean Carmody
Actuarial Associate
Bureau of Accident & Health Insurance

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Catholic Order of Foresters	39.990%	20.000%	\$3,519	8	\$17,597	20.000%	20.000%

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Transmittal Letter (A&H)		Yes
Supporting Document	Actuarial Certification (A&H)		Yes
Supporting Document	Actuarial Memorandum and Explanatory Information (A&H)		Yes
Supporting Document	Advertisements (A&H)		Yes
Supporting Document	Authorization to File (A&H)		Yes
Supporting Document	Insert Page Explanation (A&H)		Yes
Supporting Document	Rate Table (A&H)		Yes
Supporting Document	Replacement Form with Highlighted Changes (A&H)		Yes
Supporting Document	Advertisement Compliance Certification		Yes
Supporting Document	Reserve Calculation (A&H)		Yes
Supporting Document	Variability Explanation (A&H)		Yes
Supporting Document	Sample Policyholder Notification Letter		Yes
Supporting Document	Rate Increase History		Yes
Rate (revised)	Premium Rate Sheets		Yes
Rate	Premium Rate Sheets		No

State: Pennsylvania **Filing Company:** Catholic Order of Foresters
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified
Product Name: FCNH, FCLTC, FCLTC 2000
Project Name/Number: COF LTC Rate Inc 2021 - Gens 1 and 2/

Objection Letter

Objection Letter Status	Disapproved
Objection Letter Date	09/27/2021
Submitted Date	09/27/2021
Respond By Date	

Dear Eva Gaber,

Introduction:

Sep 27, 2021

Eva Gaber, Consulting Actuary
201 West Canton Avenue
Suite 225
Winter Park, FL 32789

RE: Proposed 39.99% increase on 8 policyholders of individual long term care forms FCNH, FCLTC, and FCLTC 2000.
Pennsylvania Insurance Department ID # UHAS-132946160

Dear Eva Gaber:

The captioned filing has been reviewed by the Pennsylvania Insurance Department. It has been determined that the filing fails to meet the requirements of our Insurance Company Laws or regulations and is therefore disapproved pursuant to the authority granted under Section 304(a) of Act 134, the Accident and Health Filing Reform Act. In the event you have any questions regarding the stated concerns, please feel free to contact the Department for further clarification.

The disapproved filing may be resubmitted within 120 days of the date of disapproval. If the Department does not hear from you within 120 days, the subject filing will be permanently closed. Such filings resubmitted after 120 days must be submitted as a new filing, inclusive of appropriate filing fees and disclosure of the closed filing SERFF tracking number.

The Department cannot approve this filing as submitted. Alternatively, we can offer a 20% increase on the above captioned forms.

If Catholic Order of Foresters would like to accept our offer, then please respond with an acceptance letter.

Sincerely,

Sean Carmody
Actuarial Associate
Bureau of Life, Accident and Health Insurance

Conclusion:

Sincerely,
Sean Carmody

State: Pennsylvania **Filing Company:** Catholic Order of Foresters
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified
Product Name: FCNH, FCLTC, FCLTC 2000
Project Name/Number: COF LTC Rate Inc 2021 - Gens 1 and 2/

Objection Letter

Objection Letter Status Disapproved
Objection Letter Date 09/08/2021
Submitted Date 09/08/2021
Respond By Date

Dear Eva Gaber,

Introduction:

Sept 8, 2021

Eva Gaber, Consulting Actuary
United Health Actuarial Services
1089 W. Morse Blvd.
Winter Park, FL 32792

RE:Proposed 39.99% increase on 8 PA policyholders of Catholic Order of Foresters' individual LTC form FCNH, FCLTC, and FCLTC 2000.

Pennsylvania Insurance Department ID # UHAS-132946160

Dear Eva Gaber:

The captioned filing has been reviewed by the Pennsylvania Insurance Department. It has been determined that the filing fails to meet the requirements of our Insurance Company Laws or regulations and is therefore disapproved pursuant to the authority granted under Section 304(a) of Act 134, the Accident and Health Filing Reform Act. In the event you have any questions regarding the stated concerns, please feel free to contact the Department for further clarification.

The disapproved filing may be resubmitted within 120 days of the date of disapproval. If the Department does not hear from you within 120 days, the subject filing will be permanently closed. Such filings resubmitted after 120 days must be submitted as a new filing, inclusive of appropriate filing fees and disclosure of the closed filing SERFF tracking number.

Please furnish the following information to the Department.

1. Please provide a table in an Excel spreadsheet for this nationwide block of policies which shows the historical and projected nationwide earned premium and incurred claims on a calendar year basis assuming no rate increase is granted. Please restate the nationwide historical and projected earned premium so that the business from inception appears to have all been earned at the original rate level. The original rate level is the rate level that would have existed if no increase was ever granted on any policy nationwide.
2. Please provide the percent of active policyholders remaining on a nationwide basis. How many policies were issued nationwide? How many policies from this block remain in force nationwide?
3. What is the weighted average increase granted on this block in PA for policies still in force? Perhaps the answer is $96\% = 1.2 * 1.16667 * 1.2 * 1.16667 - 1$, but given the re-pricing of FCLTC; it is not clear if all policies received the increases shown in the actuarial memo.
4. Of the 8 policies in force, how many were issued after 9/15/2002?
5. Please provide the rate increase history by state on this series (include a column that shows the cumulative increase) in an Excel spreadsheet.

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Sincerely,

Sean Carmody
Actuarial Associate
Bureau of Life, Accident and Health Insurance

Conclusion:

Sincerely,
Sean Carmody
Sincerely,
Sean Carmody

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	09/28/2021
Submitted Date	09/28/2021

Dear Sean Carmody,

Introduction:

Response 1

Comments:

Catholic Order of Foresters accepts your offer. Attached are revised premium rate sheets reflecting a 20% rate increase. We will also submit a post-submission update.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes						
Item No.	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments	Date Submitted
1	Premium Rate Sheets	FCNH, FCLTC, FCLTC 2000	Revised	Previous State Filing Number: UHAS-132269534 Percent Rate Change Request: 20	Rates FCNH PA-2021 Rev0921.pdf, Rates FCLTC PA-2021 Rev0921.pdf, Rates FCLTC 2000 PA-2021 Rev0921.pdf,	09/28/2021 By: Michael Blaser
<i>Previous Version</i>						
1	Premium Rate Sheets	FCNH, FCLTC, FCLTC 2000	Revised	Previous State Filing Number: UHAS-132269534 Percent Rate Change Request: 39.99	Rates FCNH PA-2021.pdf, Rates FCLTC PA-2021.pdf, Rates FCLTC 2000 PA-2021.pdf,	08/31/2021 By: Eva Gaber

Conclusion:

SERFF Tracking #:	UHAS-132946160	State Tracking #:	UHAS-132946160	Company Tracking #:	
State:	Pennsylvania	Filing Company:	Catholic Order of Foresters		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified				
Product Name:	FCNH, FCLTC, FCLTC 2000				
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/				

Sincerely,
Michael Blaser

SERFF Tracking #:	UHAS-132946160	State Tracking #:	UHAS-132946160	Company Tracking #:	
State:	Pennsylvania	Filing Company:	Catholic Order of Foresters		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified				
Product Name:	FCNH, FCLTC, FCLTC 2000				
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/				

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	09/21/2021
Submitted Date	09/22/2021

Dear Sean Carmody,

Introduction:

Response 1

Comments:

SERFF Tracking #:	UHAS-132946160	State Tracking #:	UHAS-132946160	Company Tracking #:	
State:	Pennsylvania	Filing Company:	Catholic Order of Foresters		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified				
Product Name:	FCNH, FCLTC, FCLTC 2000				
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/				

1. Please provide a table in an Excel spreadsheet for this nationwide block of policies which shows the historical and projected nationwide earned premium and incurred claims on a calendar year basis assuming no rate increase is granted. Please restate the nationwide historical and projected earned premium so that the business from inception appears to have all been earned at the original rate level. The original rate level is the rate level that would have existed if no increase was ever granted on any policy nationwide.

Please see the first worksheet in the file COF PA Exhibits 2021.xlsx (located under the Actuarial Memorandum and Explanatory Information (A&H) section of the Supporting Documentation tab). Premiums restated to the original rate level are included in column P

2. Please provide the percent of active policyholders remaining on a nationwide basis. How many policies were issued nationwide? How many policies from this block remain in force nationwide?

There were 1,014 policies issued nationwide. Of those, 665 or 65.6% are still active, including 37 active policies that are in nonforfeiture status.

3. What is the weighted average increase granted on this block in PA for policies still in force? Perhaps the answer is $96\% = 1.2 * 1.16667 * 1.2 * 1.16667 - 1$, but given the re-pricing of FCLTC; it is not clear if all policies received the increases shown in the actuarial memo.

All policies remaining in force have received rate increases totaling 96.01% ($1.2 * 1.16667 * 1.2 * 1.16667$). Only two policies were affected by the repricing of FCLTC, and the premium for each of these policies decreased as a result. Including the effect of repricing, the total effect of all past rate revisions over all of the policies remaining in force is 88.1%.

4. Of the 8 policies in force, how many were issued after 9/15/2002?

6 of the 8 policies in force were issued after 9/15/2002.

5. Please provide the rate increase history by state on this series (include a column that shows the cumulative increase) in an Excel spreadsheet.

Please see the attached Excel file: COF Filing Status Round 5 Gen 12.xlsx.

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	Rate Increase History
Comments:	
Attachment(s):	COF Filing Status Round 5 Gen 12.xlsx

No Form Schedule items changed.

SERFF Tracking #:	UHAS-132946160	State Tracking #:	UHAS-132946160	Company Tracking #:	
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State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely,
Michael Blaser

State: Pennsylvania **Filing Company:** Catholic Order of Foresters
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified
Product Name: FCNH, FCLTC, FCLTC 2000
Project Name/Number: COF LTC Rate Inc 2021 - Gens 1 and 2/

Post Submission Update Request Processed On 09/28/2021

Status: Allowed
Created By: Eva Gaber
Processed By: Sean Carmody
Comments:

General Information:

Field Name	Requested Change	Prior Value
Overall Rate Impact	20	39.99

Company Rate Information:

Company Name:Catholic Order of Foresters

Field Name	Requested Change	Prior Value
Overall % Rate Impact	20.000%	39.990%
Written Premium Change for this Program	\$3519	\$7037
Maximum %Change (where required)	20.000%	39.990%
Minimum %Change (where required)	20.000%	39.990%

SERFF Tracking #:	UHAS-132946160	State Tracking #:	UHAS-132946160	Company Tracking #:	
State:	Pennsylvania	Filing Company:	Catholic Order of Foresters		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified				
Product Name:	FCNH, FCLTC, FCLTC 2000				
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/				

Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	16.670%
Effective Date of Last Rate Revision:	12/01/2020
Filing Method of Last Filing:	SERFF
SERFF Tracking Number of Last Filing:	UHAS-132269534

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Catholic Order of Foresters	39.990%	20.000%	\$3,519	8	\$17,597	20.000%	20.000%

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Premium Rate Sheets	FCNH, FCLTC, FCLTC 2000	Revised	Previous State Filing Number: UHAS-132269534 Percent Rate Change Request: 20	Rates FCNH PA-2021 Rev0921.pdf, Rates FCLTC PA-2021 Rev0921.pdf, Rates FCLTC 2000 PA-2021 Rev0921.pdf,

Catholic Order of Foresters
Nursing Home Only Policy - Form FCNH, \$10/Day Annual Premiums
Standard Rates - Before Spouse & Preferred Risk Discount

Issue Age	<u>730-Day Benefit Period</u> Elimination Period			<u>1095-Day Benefit Period</u> Elimination Period			<u>1825-Day Benefit Period</u> Elimination Period			<u>Lifetime Benefit Period</u> Elimination Period		
	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>
18-44	31.56	30.18	29.40	33.90	32.54	31.56	36.84	35.28	34.30	46.64	44.50	42.92
45-49	38.02	36.26	35.08	41.74	39.60	38.22	46.26	43.90	42.34	59.98	56.64	54.48
50	43.90	41.74	40.18	48.80	46.26	44.50	54.88	51.94	49.98	71.94	67.82	65.08
51	46.06	43.52	41.94	51.16	48.42	46.64	57.82	54.48	52.52	76.05	71.54	68.60
52	48.02	45.28	43.52	53.50	50.56	48.60	60.56	57.24	54.88	79.97	75.26	72.13
53	50.76	47.82	46.06	57.04	53.70	51.54	64.68	60.96	58.60	85.66	80.56	77.03
54	53.50	50.38	48.42	60.37	56.84	54.48	69.00	64.88	62.14	91.54	85.85	82.12
55	56.44	53.12	50.76	63.90	59.98	57.42	73.11	68.80	65.86	97.22	91.14	87.02
56	59.20	55.66	53.32	67.23	63.12	60.37	77.22	72.52	69.38	102.90	96.44	92.12
57	61.94	58.22	55.66	70.76	66.25	63.50	81.34	76.44	73.11	108.58	101.72	97.02
58	67.62	63.31	60.56	77.42	72.52	69.38	89.58	83.89	80.16	120.94	113.10	107.80
59	73.11	68.40	65.27	84.28	78.80	75.26	97.61	91.54	87.22	133.28	124.66	118.78
60	78.80	73.50	70.17	90.94	85.06	81.14	105.84	98.98	94.48	145.63	136.03	129.56
61	84.28	78.60	75.07	97.80	91.34	87.02	113.88	106.43	101.53	158.18	147.59	140.34
62	89.96	83.89	79.78	104.47	97.42	92.90	122.11	114.08	108.58	170.52	158.96	151.12
63	101.34	94.28	89.58	118.39	110.35	104.86	138.77	129.56	123.29	187.77	174.84	166.21
64	112.70	104.66	99.57	132.30	123.09	117.02	155.43	144.85	137.79	205.02	190.91	181.11
65	124.07	115.25	109.37	146.02	135.83	128.97	172.09	160.33	152.30	222.27	206.79	196.20
66	135.44	125.64	119.17	159.94	148.57	141.12	188.75	175.62	166.80	239.52	222.66	211.29
67	146.81	136.03	128.97	173.86	161.31	153.08	205.41	191.11	181.50	256.77	238.73	226.19
68	162.29	150.34	142.50	192.67	178.76	169.54	228.15	212.08	201.30	287.73	267.35	253.43
69	177.58	164.45	155.82	211.49	196.20	186.01	250.69	233.05	221.09	318.91	295.97	280.49
70	193.07	178.76	169.35	230.11	213.45	202.28	273.23	253.83	240.89	349.87	324.79	307.53
71	208.55	193.07	182.68	248.93	230.89	218.74	295.77	274.80	260.49	380.83	353.39	334.77
72	223.84	207.18	196.20	267.75	248.34	235.21	318.51	295.77	280.29	411.81	382.21	361.83
73	251.87	233.05	220.70	302.05	280.09	265.19	359.67	333.99	316.55	457.87	424.75	402.01
74	279.89	258.93	245.01	336.35	311.65	295.19	400.83	372.21	352.61	503.73	467.28	442.19
75	307.93	284.79	269.51	370.65	343.41	325.17	442.19	410.43	388.87	549.60	509.81	482.37
76	335.95	310.87	294.01	404.75	375.15	355.17	483.35	448.65	424.94	595.66	552.34	522.55
77	363.99	336.73	318.51	439.05	406.91	385.15	524.51	486.88	461.20	641.52	594.88	562.73
78	408.87	377.89	357.31	494.13	457.87	433.17	590.96	548.23	519.22	711.70	659.56	623.88
79	453.55	419.06	396.33	549.21	508.63	481.19	657.60	609.78	577.43	782.06	724.44	685.04
80	498.25	460.22	435.13	604.28	559.40	529.22	724.04	671.32	635.45	852.23	789.32	746.20
81	543.13	501.58	473.94	659.36	610.36	577.24	790.49	732.86	693.66	922.40	854.19	807.34
82	587.82	542.74	512.95	714.44	661.12	625.46	856.94	794.22	751.68	992.77	918.87	868.50
83	629.18	580.57	548.23	764.62	707.18	668.58	916.91	849.29	803.42	1,060.19	980.81	926.52
84	670.54	618.40	583.70	814.99	753.24	711.90	976.69	904.17	855.17	1,127.81	1,042.95	984.73
85+	876.54	804.40	756.58	1,058.43	973.95	917.31	1,261.69	1,163.69	1,097.63	1,452.60	1,338.32	1,260.51

Catholic Order of Foresters
Nursing Home Only Policy - Form FCNH, \$10/Day Annual Premiums
Standard Rates - Before Spouse & Preferred Risk Discount

Issue Age	<u>730-Day Benefit Period</u>			<u>1095-Day Benefit Period</u>			<u>1825-Day Benefit Period</u>			<u>Lifetime Benefit Period</u>		
	Elimination Period			Elimination Period			Elimination Period			Elimination Period		
	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>
18-44	37.87	36.22	35.28	40.68	39.05	37.87	44.21	42.34	41.16	55.97	53.40	51.50
45-49	45.62	43.51	42.10	50.09	47.52	45.86	55.51	52.68	50.81	71.98	67.97	65.38
50	52.68	50.09	48.22	58.56	55.51	53.40	65.86	62.33	59.98	86.33	81.38	78.10
51	55.27	52.22	50.33	61.39	58.10	55.97	69.38	65.38	63.02	91.26	85.85	82.32
52	57.62	54.34	52.22	64.20	60.67	58.32	72.67	68.69	65.86	95.96	90.31	86.56
53	60.91	57.38	55.27	68.45	64.44	61.85	77.62	73.15	70.32	102.79	96.67	92.44
54	64.20	60.46	58.10	72.44	68.21	65.38	82.80	77.86	74.57	109.85	103.02	98.54
55	67.73	63.74	60.91	76.68	71.98	68.90	87.73	82.56	79.03	116.66	109.37	104.42
56	71.04	66.79	63.98	80.68	75.74	72.44	92.66	87.02	83.26	123.48	115.73	110.54
57	74.33	69.86	66.79	84.91	79.50	76.20	97.61	91.73	87.73	130.30	122.06	116.42
58	81.14	75.97	72.67	92.90	87.02	83.26	107.50	100.67	96.19	145.13	135.72	129.36
59	87.73	82.08	78.32	101.14	94.56	90.31	117.13	109.85	104.66	159.94	149.59	142.54
60	94.56	88.20	84.20	109.13	102.07	97.37	127.01	118.78	113.38	174.76	163.24	155.47
61	101.14	94.32	90.08	117.36	109.61	104.42	136.66	127.72	121.84	189.82	177.11	168.41
62	107.95	100.67	95.74	125.36	116.90	111.48	146.53	136.90	130.30	204.62	190.75	181.34
63	121.61	113.14	107.50	142.07	132.42	125.83	166.52	155.47	147.95	225.32	209.81	199.45
64	135.24	125.59	119.48	158.76	147.71	140.42	186.52	173.82	165.35	246.02	229.09	217.33
65	148.88	138.30	131.24	175.22	163.00	154.76	206.51	192.40	182.76	266.72	248.15	235.44
66	162.53	150.77	143.00	191.93	178.28	169.34	226.50	210.74	200.16	287.42	267.19	253.55
67	176.17	163.24	154.76	208.63	193.57	183.70	246.49	229.33	217.80	308.12	286.48	271.43
68	194.75	180.41	171.00	231.20	214.51	203.45	273.78	254.50	241.56	345.28	320.82	304.12
69	213.10	197.34	186.98	253.79	235.44	223.21	300.83	279.66	265.31	382.69	355.16	336.59
70	231.68	214.51	203.22	276.13	256.14	242.74	327.88	304.60	289.07	419.84	389.75	369.04
71	250.26	231.68	219.22	298.72	277.07	262.49	354.92	329.76	312.59	457.00	424.07	401.72
72	268.61	248.62	235.44	321.30	298.01	282.25	382.21	354.92	336.35	494.17	458.65	434.20
73	302.24	279.66	264.84	362.46	336.11	318.23	431.60	400.79	379.86	549.44	509.70	482.41
74	335.87	310.72	294.01	403.62	373.98	354.23	481.00	446.65	423.13	604.48	560.74	530.63
75	369.52	341.75	323.41	444.78	412.09	390.20	530.63	492.52	466.64	659.52	611.77	578.84
76	403.14	373.04	352.81	485.70	450.18	426.20	580.02	538.38	509.93	714.79	662.81	627.06
77	436.79	404.08	382.21	526.86	488.29	462.18	629.41	584.26	553.44	769.82	713.86	675.28
78	490.64	453.47	428.77	592.96	549.44	519.80	709.15	657.88	623.06	854.04	791.47	748.66
79	544.26	502.87	475.60	659.05	610.36	577.43	789.12	731.74	692.92	938.47	869.33	822.05
80	597.90	552.26	522.16	725.14	671.28	635.06	868.85	805.58	762.54	1,022.68	947.18	895.44
81	651.76	601.90	568.73	791.23	732.43	692.69	948.59	879.43	832.39	1,106.88	1,025.03	968.81
82	705.38	651.29	615.54	857.33	793.34	750.55	1,028.33	953.06	902.02	1,191.32	1,102.64	1,042.20
83	755.02	696.68	657.88	917.54	848.62	802.30	1,100.29	1,019.15	964.10	1,272.23	1,176.97	1,111.82
84	804.65	742.08	700.44	977.99	903.89	854.28	1,172.03	1,085.00	1,026.20	1,353.37	1,251.54	1,181.68
85+	1,051.85	965.28	907.90	1,270.12	1,168.74	1,100.77	1,514.03	1,396.43	1,317.16	1,743.12	1,605.98	1,512.61

Catholic Order of Foresters
Optional Rider Factors

<u>Issue Age</u>	<u>Rider FCIPR Inflation Protection</u>	<u>Rider FCNFB Non-Forfeiture Benefit</u>
18-44	2.49	1.25
45-49	2.44	1.20
50	2.38	1.15
51	2.35	1.14
52	2.33	1.14
53	2.30	1.14
54	2.28	1.14
55	2.25	1.14
56	2.23	1.14
57	2.20	1.14
58	2.17	1.14
59	2.13	1.14
60	2.10	1.14
61	2.06	1.14
62	2.03	1.13
63	2.00	1.13
64	1.97	1.13
65	1.94	1.13
66	1.91	1.12
67	1.88	1.12
68	1.85	1.12
69	1.81	1.12
70	1.77	1.11
71	1.73	1.11
72	1.69	1.11
73	1.66	1.10
74	1.63	1.10
75	1.60	1.09
76	1.58	1.09
77	1.55	1.08
78	1.52	1.08
79	1.50	1.07
80	1.47	1.07
81	1.45	1.07
82	1.42	1.06
83	1.41	1.06
84	1.39	1.06
85+	1.33	1.06

Premium Calculation Example:

Annual Base Premium

x

Inflation Protection Factor
(if chosen by Insured)

x

Non-Forfeiture Benefit Factor
(if chosen by Insured)

=

Total Gross Premium

Spouse Discount

10%

Preferred Risk Discount

10%

Modal Factors

Semi-Annual: 0.52

Quarterly: 0.265

Monthly PAC: 0.0875

Catholic Order of Foresters
Base Plan (Form FCLTC-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	21.56	24.41	28.22	35.77
45-49	46.74	54.26	64.32	83.68
50	53.41	62.51	74.65	97.80
51	55.21	64.78	77.50	101.81
52	57.03	67.04	80.36	105.77
53	58.83	69.30	83.23	109.77
54	60.65	71.55	86.11	113.76
55	62.44	73.83	88.97	117.77
56	66.93	79.38	95.88	127.29
57	71.45	84.96	102.81	136.81
58	75.94	90.49	109.75	146.32
59	80.44	96.05	116.65	155.84
60	84.94	101.62	123.58	165.36
61	92.89	111.54	136.06	182.68
62	100.85	121.50	148.54	199.95
63	108.79	131.41	161.02	217.27
64	116.75	141.33	173.48	234.55
65	124.73	151.29	185.98	251.87
66	138.11	167.91	206.79	276.85
67	151.53	184.57	227.58	301.83
68	164.94	201.21	248.41	326.82
69	178.35	217.87	269.20	351.76
70	191.76	234.52	290.01	376.74
71	218.17	267.36	331.12	422.37
72	244.60	300.22	372.20	467.98
73	271.00	333.08	413.29	513.60
74	297.44	365.92	454.37	559.22
75	323.88	398.78	495.49	604.84
76	349.40	430.30	534.59	652.68
77	374.98	461.80	573.69	700.50
78	400.55	493.33	612.79	748.32
79	426.11	524.83	651.88	796.14
80	451.68	556.36	690.99	843.97
81	487.16	600.38	745.93	911.34
82	522.63	644.39	800.89	978.76
83	558.10	688.45	855.87	1046.16
84	593.57	732.45	910.84	1113.53
85+	723.39	892.93	1110.66	1358.10

Catholic Order of Foresters
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	3.42	4.01	4.99	6.07
45-49	8.81	10.31	12.90	16.05
50	10.42	12.25	15.28	19.13
51	10.76	12.61	15.75	19.72
52	11.05	12.95	16.18	20.29
53	11.35	13.32	16.64	20.87
54	11.64	13.70	17.07	21.44
55	11.96	14.02	17.52	22.03
56	12.65	14.83	18.53	23.30
57	13.35	15.66	19.53	24.57
58	14.02	16.46	20.56	25.85
59	14.72	17.27	21.56	27.14
60	15.41	18.06	22.55	28.41
61	16.39	19.20	23.99	30.18
62	17.37	20.36	25.39	31.97
63	18.40	21.47	26.79	33.74
64	19.38	22.61	28.21	35.55
65	20.36	23.73	29.61	37.32
66	21.75	25.32	31.58	41.07
67	23.12	26.93	33.59	44.81
68	24.50	28.51	35.56	48.58
69	25.89	30.10	37.53	52.34
70	27.28	31.69	39.50	56.07
71	33.19	38.73	48.32	64.40
72	39.08	45.79	57.14	72.74
73	44.96	52.84	65.97	81.07
74	50.87	59.90	74.79	89.45
75	56.76	66.95	83.61	97.78
76	59.81	70.55	88.11	103.00
77	62.89	74.16	92.60	108.22
78	65.93	77.73	97.10	113.47
79	68.98	81.34	101.60	118.70
80	72.03	84.94	106.06	123.95
81	77.03	90.82	113.41	132.50
82	82.03	96.70	120.77	141.10
83	87.04	102.60	128.10	149.65
84	92.04	108.48	135.45	158.25
85+	111.61	131.51	164.24	191.82

Catholic Order of Foresters
5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	21.97	25.98	31.00	40.89
45-49	43.10	52.36	64.17	87.02
50	47.73	58.50	72.22	98.77
51	48.21	59.22	73.32	100.57
52	48.59	59.90	74.30	102.19
53	48.91	60.46	75.17	103.61
54	49.16	60.93	75.88	104.87
55	49.33	61.28	76.52	105.97
56	51.67	64.31	80.36	111.51
57	53.88	67.12	83.89	116.55
58	55.87	69.68	87.13	121.15
59	57.74	72.03	90.07	125.32
60	59.46	74.18	92.69	128.99
61	63.52	79.41	99.59	139.93
62	67.35	84.29	106.05	150.36
63	70.94	88.82	112.08	160.35
64	74.27	93.01	117.62	169.82
65	77.33	96.82	122.73	178.84
66	82.04	102.77	130.26	186.02
67	86.06	107.79	136.55	191.37
68	89.39	111.89	141.59	194.76
69	92.03	115.04	145.37	196.29
70	93.97	117.28	147.90	195.91
71	102.54	127.80	161.59	209.50
72	110.07	136.91	173.45	220.88
73	116.54	144.55	183.49	230.10
74	121.94	150.76	191.76	237.10
75	126.31	155.53	198.19	241.94
76	128.50	158.25	201.87	246.45
77	129.56	159.56	203.76	248.81
78	129.48	159.48	203.93	249.04
79	128.29	157.99	202.35	247.13
80	125.93	155.12	199.02	243.06
81	123.97	152.80	196.58	240.18
82	120.32	148.35	191.47	233.96
83	114.93	141.74	183.66	224.50
84	107.80	133.02	173.16	211.70
85+	88.69	109.47	145.13	177.47

Catholic Order of Foresters
5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	28.89	33.62	40.76	52.92
45-49	59.99	71.27	88.23	117.62
50	67.46	80.63	100.38	134.77
51	68.30	81.75	101.99	137.22
52	69.02	82.80	103.46	139.46
53	69.68	83.70	104.77	141.52
54	70.26	84.50	105.94	143.36
55	70.75	85.19	106.99	145.02
56	74.09	89.47	112.34	152.18
57	77.26	93.51	117.42	158.83
58	80.27	97.31	122.18	164.95
59	83.08	100.87	126.61	170.55
60	85.67	104.24	130.71	175.65
61	91.15	111.24	139.53	186.00
62	96.37	117.90	147.82	195.25
63	101.30	124.20	155.63	203.44
64	105.94	130.15	162.95	210.58
65	110.28	135.75	169.74	216.60
66	116.69	143.59	179.86	234.36
67	122.32	150.43	188.73	251.40
68	127.19	156.23	196.29	267.77
69	131.30	161.03	202.56	283.45
70	134.63	164.81	207.57	298.44
71	151.32	185.06	233.52	321.44
72	166.72	203.58	257.25	340.96
73	180.84	220.34	278.79	357.02
74	193.67	235.34	298.12	369.66
75	205.20	248.60	315.27	378.79
76	210.31	254.74	323.22	388.36
77	214.15	259.33	329.28	395.51
78	216.71	262.36	333.34	400.26
79	218.03	263.83	335.46	402.67
80	218.04	263.72	335.65	402.70
81	220.62	266.73	339.88	407.60
82	221.22	267.33	341.12	408.79
83	219.89	265.46	339.28	406.24
84	216.56	261.18	334.39	400.01
85+	213.95	257.09	330.83	394.34

Catholic Order of Foresters
Base Plan (Form FCLTC-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	25.87	29.29	33.86	42.92
45-49	56.09	65.11	77.18	100.42
50	64.09	75.01	89.58	117.36
51	66.25	77.74	93.00	122.17
52	68.44	80.45	96.43	126.92
53	70.60	83.16	99.88	131.72
54	72.78	85.86	103.33	136.51
55	74.93	88.60	106.76	141.32
56	80.32	95.26	115.06	152.75
57	85.74	101.95	123.37	164.17
58	91.13	108.59	131.70	175.58
59	96.53	115.26	139.98	187.01
60	101.93	121.94	148.30	198.43
61	111.47	133.85	163.27	219.22
62	121.02	145.80	178.25	239.94
63	130.55	157.69	193.22	260.72
64	140.10	169.60	208.18	281.46
65	149.68	181.55	223.18	302.24
66	165.73	201.49	248.15	332.22
67	181.84	221.48	273.10	362.20
68	197.93	241.45	298.09	392.18
69	214.02	261.44	323.04	422.11
70	230.11	281.42	348.01	452.09
71	261.80	320.83	397.34	506.84
72	293.52	360.26	446.64	561.58
73	325.20	399.70	495.95	616.32
74	356.93	439.10	545.24	671.06
75	388.66	478.54	594.59	725.81
76	419.28	516.36	641.51	783.22
77	449.98	554.16	688.43	840.60
78	480.66	592.00	735.35	897.98
79	511.33	629.80	782.26	955.37
80	542.02	667.63	829.19	1012.76
81	584.59	720.46	895.12	1093.61
82	627.16	773.27	961.07	1174.51
83	669.72	826.14	1027.04	1255.39
84	712.28	878.94	1093.01	1336.24
85+	868.07	1071.52	1332.79	1629.72

Catholic Order of Foresters
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	4.10	4.81	5.99	7.28
45-49	10.57	12.37	15.48	19.26
50	12.50	14.70	18.34	22.96
51	12.91	15.13	18.90	23.66
52	13.26	15.54	19.42	24.35
53	13.62	15.98	19.97	25.04
54	13.97	16.44	20.48	25.73
55	14.35	16.82	21.02	26.44
56	15.18	17.80	22.24	27.96
57	16.02	18.79	23.44	29.48
58	16.82	19.75	24.67	31.02
59	17.66	20.72	25.87	32.57
60	18.49	21.67	27.06	34.09
61	19.67	23.04	28.79	36.22
62	20.84	24.43	30.47	38.36
63	22.08	25.76	32.15	40.49
64	23.26	27.13	33.85	42.66
65	24.43	28.48	35.53	44.78
66	26.10	30.38	37.90	49.28
67	27.74	32.32	40.31	53.77
68	29.40	34.21	42.67	58.30
69	31.07	36.12	45.04	62.81
70	32.74	38.03	47.40	67.28
71	39.83	46.48	57.98	77.28
72	46.90	54.95	68.57	87.29
73	53.95	63.41	79.16	97.28
74	61.04	71.88	89.75	107.34
75	68.11	80.34	100.33	117.34
76	71.77	84.66	105.73	123.60
77	75.47	88.99	111.12	129.86
78	79.12	93.28	116.52	136.16
79	82.78	97.61	121.92	142.44
80	86.44	101.93	127.27	148.74
81	92.44	108.98	136.09	159.00
82	98.44	116.04	144.92	169.32
83	104.45	123.12	153.72	179.58
84	110.45	130.18	162.54	189.90
85+	133.93	157.81	197.09	230.18

Catholic Order of Foresters
5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	26.36	31.18	37.20	49.07
45-49	51.72	62.83	77.00	104.42
50	57.28	70.20	86.66	118.52
51	57.85	71.06	87.98	120.68
52	58.31	71.88	89.16	122.63
53	58.69	72.55	90.20	124.33
54	58.99	73.12	91.06	125.84
55	59.20	73.54	91.82	127.16
56	62.00	77.17	96.43	133.81
57	64.66	80.54	100.67	139.86
58	67.04	83.62	104.56	145.38
59	69.29	86.44	108.08	150.38
60	71.35	89.02	111.23	154.79
61	76.22	95.29	119.51	167.92
62	80.82	101.15	127.26	180.43
63	85.13	106.58	134.50	192.42
64	89.12	111.61	141.14	203.78
65	92.80	116.18	147.28	214.61
66	98.45	123.32	156.31	223.22
67	103.27	129.35	163.86	229.64
68	107.27	134.27	169.91	233.71
69	110.44	138.05	174.44	235.55
70	112.76	140.74	177.48	235.09
71	123.05	153.36	193.91	251.40
72	132.08	164.29	208.14	265.06
73	139.85	173.46	220.19	276.12
74	146.33	180.91	230.11	284.52
75	151.57	186.64	237.83	290.33
76	154.20	189.90	242.24	295.74
77	155.47	191.47	244.51	298.57
78	155.38	191.38	244.72	298.85
79	153.95	189.59	242.82	296.56
80	151.12	186.14	238.82	291.67
81	148.76	183.36	235.90	288.22
82	144.38	178.02	229.76	280.75
83	137.92	170.09	220.39	269.40
84	129.36	159.62	207.79	254.04
85+	106.43	131.36	174.16	212.96

Catholic Order of Foresters
5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	34.67	40.34	48.91	63.50
45-49	71.99	85.52	105.88	141.14
50	80.95	96.76	120.46	161.72
51	81.96	98.10	122.39	164.66
52	82.82	99.36	124.15	167.35
53	83.62	100.44	125.72	169.82
54	84.31	101.40	127.13	172.03
55	84.90	102.23	128.39	174.02
56	88.91	107.36	134.81	182.62
57	92.71	112.21	140.90	190.60
58	96.32	116.77	146.62	197.94
59	99.70	121.04	151.93	204.66
60	102.80	125.09	156.85	210.78
61	109.38	133.49	167.44	223.20
62	115.64	141.48	177.38	234.30
63	121.56	149.04	186.76	244.13
64	127.13	156.18	195.54	252.70
65	132.34	162.90	203.69	259.92
66	140.03	172.31	215.83	281.23
67	146.78	180.52	226.48	301.68
68	152.63	187.48	235.55	321.32
69	157.56	193.24	243.07	340.14
70	161.56	197.77	249.08	358.13
71	181.58	222.07	280.22	385.73
72	200.06	244.30	308.70	409.15
73	217.01	264.41	334.55	428.42
74	232.40	282.41	357.74	443.59
75	246.24	298.32	378.32	454.55
76	252.37	305.69	387.86	466.03
77	256.98	311.20	395.14	474.61
78	260.05	314.83	400.01	480.31
79	261.64	316.60	402.55	483.20
80	261.65	316.46	402.78	483.24
81	264.74	320.08	407.86	489.12
82	265.46	320.80	409.34	490.55
83	263.87	318.55	407.14	487.49
84	259.87	313.42	401.27	480.01
85+	256.74	308.51	397.00	473.21

Catholic Order of Foresters
Premium Adjustment Factors
Attributable to Increasing Elimination Periods

Days in Elimination Period		
20	60	90
1.15	1.07	1.00

Catholic Order of Foresters
Nonforfeiture Benefit Rider (FCNFBR-PA)
Factors to Apply to Total Premium
(Premium for Base Policy and Any Other Riders)

Issue Age	Factor
18-44	25%
45-49	19%
50-55	17%
56-60	16%
61-65	15%
66-70	14%
71-75	13%
76-80	12%
>=81	11%

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	29.81	34.51	40.83	54.17
45-49	42.61	49.30	58.31	77.35
50	53.99	63.38	75.88	102.48
51	56.23	66.15	79.38	107.50
52	58.48	68.93	82.88	112.50
53	60.74	71.74	86.37	117.53
54	62.94	74.51	89.87	122.57
55	65.18	77.31	93.37	127.59
56	69.37	82.49	99.85	136.90
57	73.53	87.69	106.33	146.21
58	77.71	92.83	112.82	155.52
59	81.90	98.03	119.30	164.83
60	86.06	103.21	125.81	174.14
61	94.16	113.31	138.48	192.45
62	102.25	123.40	151.19	210.73
63	110.33	133.51	163.86	229.06
64	118.42	143.60	176.57	247.38
65	126.52	153.70	189.24	265.68
66	141.64	172.58	212.93	292.70
67	156.79	191.43	236.60	319.70
68	171.90	210.31	260.27	346.71
69	187.02	229.16	283.93	373.69
70	202.17	248.04	307.61	400.71
71	229.82	282.46	350.72	445.40
72	257.46	316.91	393.84	490.03
73	285.11	351.33	436.93	534.70
74	312.75	385.76	480.05	579.36
75	340.40	420.16	523.15	624.01
76	366.06	451.92	562.63	671.20
77	391.74	483.66	602.11	718.37
78	417.41	515.41	641.59	765.59
79	443.09	547.15	681.05	812.75
80	468.76	578.90	720.53	859.95
81	503.54	622.13	774.60	924.73
82	538.32	665.36	828.64	989.50
83	573.09	708.58	882.70	1054.30
84	607.84	751.81	936.74	1119.08
85+	642.62	795.07	990.81	1183.86

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	35.40	41.08	49.00	68.02
45-49	50.56	58.69	70.00	97.15
50	64.76	76.03	91.70	129.34
51	67.40	79.27	95.75	135.41
52	70.00	82.51	99.80	141.45
53	72.65	85.75	103.87	147.52
54	75.28	88.98	107.92	153.58
55	77.91	92.22	111.99	159.66
56	82.72	98.13	119.38	170.71
57	87.51	104.05	126.79	181.73
58	92.33	109.96	134.18	192.79
59	97.14	115.85	141.59	203.83
60	101.93	121.79	148.98	214.85
61	111.02	133.02	163.09	236.07
62	120.12	144.27	177.20	257.26
63	129.18	155.52	191.33	278.46
64	138.28	166.77	205.44	299.67
65	147.37	178.00	219.55	320.87
66	164.17	198.83	245.66	351.53
67	181.00	219.64	271.75	382.20
68	197.80	240.43	297.85	412.86
69	214.63	261.26	323.92	443.53
70	231.45	282.06	350.03	474.17
71	265.32	323.97	402.46	524.50
72	299.20	365.84	454.90	574.80
73	333.09	407.70	507.35	625.14
74	366.95	449.61	559.78	675.45
75	400.84	491.48	612.21	725.78
76	429.58	526.85	656.20	778.07
77	458.35	562.17	700.16	830.41
78	487.07	597.54	744.17	882.73
79	515.82	632.89	788.15	935.06
80	544.57	668.25	832.14	987.38
81	584.23	717.26	893.41	1060.39
82	623.92	766.27	954.68	1133.39
83	663.60	815.29	1015.93	1206.40
84	703.29	864.29	1077.21	1279.40
85+	742.95	913.30	1138.49	1352.42

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	52.83	63.40	77.13	104.58
45-49	75.46	90.56	110.18	149.43
50	91.47	110.58	135.27	184.44
51	94.98	114.97	140.82	192.20
52	98.48	119.37	146.33	199.95
53	101.99	123.78	151.83	207.70
54	105.47	128.17	157.38	215.48
55	108.98	132.57	162.89	223.24
56	114.59	139.58	171.73	235.60
57	120.24	146.64	180.55	247.96
58	125.84	153.68	189.41	260.36
59	131.45	160.74	198.23	272.73
60	137.09	167.78	207.07	285.09
61	148.36	181.92	224.89	310.11
62	159.63	196.10	242.69	335.16
63	170.90	210.24	260.49	360.17
64	182.17	224.43	278.32	385.22
65	193.44	238.57	296.13	410.24
66	211.69	261.48	324.89	440.43
67	229.93	284.42	353.70	470.60
68	248.16	307.33	382.48	500.78
69	266.40	330.27	411.25	530.95
70	284.67	353.18	440.03	561.14
71	314.08	390.12	486.32	610.20
72	343.49	427.02	532.63	659.28
73	372.89	463.95	578.90	708.37
74	402.30	500.88	625.19	757.47
75	431.70	537.81	671.51	806.55
76	451.98	562.96	702.70	844.00
77	472.26	588.11	733.95	881.45
78	492.53	613.29	765.13	918.94
79	512.82	638.42	796.37	956.39
80	533.07	663.60	827.61	993.84
81	560.77	698.20	870.85	1045.97
82	588.48	732.85	914.10	1098.05
83	616.17	767.46	957.37	1150.18
84	643.88	802.08	1000.62	1202.28
85+	671.59	836.72	1043.89	1254.41

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	68.98	82.33	100.78	145.31
45-49	98.52	117.62	143.98	207.57
50	120.46	144.57	177.71	257.86
51	124.84	149.97	184.53	268.05
52	129.24	155.42	191.30	278.25
53	133.59	160.82	198.09	288.43
54	137.99	166.24	204.90	298.63
55	142.37	171.67	211.69	308.83
56	149.26	180.20	222.37	324.81
57	156.15	188.73	233.05	340.78
58	163.08	197.21	243.72	356.80
59	169.96	205.74	254.40	372.77
60	176.88	214.26	265.09	388.77
61	190.32	230.92	286.00	420.22
62	203.76	247.59	306.95	451.70
63	217.19	264.28	327.84	483.15
64	230.63	280.94	348.80	514.63
65	244.10	297.60	369.74	546.09
66	265.79	324.47	403.44	583.44
67	287.45	351.34	437.12	620.78
68	309.18	378.21	470.83	658.16
69	330.84	405.08	504.53	695.49
70	352.53	431.97	538.25	732.85
71	395.43	485.03	604.75	793.11
72	438.29	538.11	671.24	853.38
73	481.18	591.17	737.74	913.61
74	524.05	644.24	804.23	973.88
75	566.95	697.30	870.73	1034.14
76	591.53	727.51	908.26	1078.79
77	616.08	757.72	945.75	1123.42
78	640.66	787.94	983.29	1168.07
79	665.23	818.14	1020.82	1212.70
80	689.81	848.34	1058.35	1257.35
81	725.02	891.83	1112.69	1322.06
82	760.23	935.32	1167.00	1386.76
83	795.49	978.78	1221.32	1451.49
84	830.70	1022.29	1275.63	1516.20
85+	865.94	1065.77	1329.98	1580.91

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	38.91	46.06	55.37	73.23
45-49	55.57	65.79	79.10	104.65
50	69.70	83.43	101.16	135.33
51	72.88	87.42	106.17	142.31
52	76.05	91.41	111.16	149.33
53	79.20	95.39	116.20	156.33
54	82.39	99.38	121.20	163.34
55	85.55	103.37	126.20	170.33
56	90.96	110.12	134.67	182.19
57	96.37	116.90	143.17	194.06
58	101.76	123.67	151.68	205.92
59	107.18	130.44	160.15	217.79
60	112.59	137.20	168.65	229.65
61	123.08	150.36	185.21	252.87
62	133.56	163.55	201.79	276.10
63	144.04	176.73	218.35	299.38
64	154.52	189.92	234.93	322.59
65	165.01	203.08	251.49	345.82
66	182.89	225.57	279.73	376.35
67	200.81	248.04	308.00	406.91
68	218.71	270.56	336.22	437.47
69	236.61	293.03	364.45	467.99
70	254.52	315.50	392.70	498.55
71	283.39	351.75	438.14	547.74
72	312.23	388.00	483.56	596.92
73	341.12	424.22	528.99	646.12
74	369.96	460.45	574.41	695.31
75	398.85	496.69	619.86	744.46
76	421.41	524.72	654.67	786.27
77	443.96	552.76	689.52	828.10
78	466.56	580.79	724.33	869.87
79	489.12	608.87	759.16	911.69
80	511.69	636.89	794.01	953.49
81	541.00	673.50	839.79	1008.65
82	570.31	710.15	885.58	1063.81
83	599.65	746.79	931.39	1118.98
84	628.96	783.44	977.18	1174.14
85+	658.28	820.07	1022.96	1229.28

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	52.44	62.01	75.26	107.10
45-49	74.95	88.56	107.51	153.00
50	94.90	113.08	138.16	198.65
51	98.97	118.09	144.44	208.06
52	103.02	123.09	150.73	217.48
53	107.10	128.10	157.00	226.89
54	111.15	133.10	163.29	236.32
55	115.22	138.11	169.57	245.72
56	121.93	146.42	179.96	261.26
57	128.66	154.68	190.34	276.78
58	135.36	162.98	200.72	292.33
59	142.09	171.24	211.10	307.85
60	148.80	179.54	221.49	323.39
61	161.42	195.19	241.11	352.89
62	174.05	210.82	260.77	382.41
63	186.67	226.47	280.40	411.90
64	199.27	242.09	300.05	441.42
65	211.90	257.75	319.69	470.93
66	233.26	284.21	352.88	508.83
67	254.61	310.67	386.05	546.74
68	275.97	337.12	419.23	584.61
69	297.32	363.58	452.40	622.53
70	318.70	390.04	485.59	660.42
71	360.65	441.97	550.65	720.88
72	402.60	493.86	615.68	781.35
73	444.56	545.79	680.72	841.77
74	486.51	597.72	745.79	902.24
75	528.50	649.64	810.84	962.69
76	555.76	683.20	852.55	1012.36
77	583.03	716.76	894.29	1061.99
78	610.29	750.29	936.04	1111.66
79	637.59	783.84	977.78	1161.32
80	664.86	817.41	1019.51	1210.95
81	701.97	863.21	1076.75	1279.15
82	739.03	909.00	1133.97	1347.34
83	776.16	954.83	1191.22	1415.56
84	813.22	1000.62	1248.46	1483.75
85+	850.34	1046.45	1305.69	1551.94

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	35.77	41.41	49.00	65.00
45-49	51.13	59.16	69.97	92.82
50	64.79	76.06	91.06	122.98
51	67.48	79.38	95.26	129.00
52	70.18	82.72	99.46	135.00
53	72.89	86.09	103.64	141.04
54	75.53	89.41	107.84	147.08
55	78.22	92.77	112.04	153.11
56	83.24	98.99	119.82	164.28
57	88.24	105.23	127.60	175.45
58	93.25	111.40	135.38	186.62
59	98.28	117.64	143.16	197.80
60	103.27	123.85	150.97	208.97
61	112.99	135.97	166.18	230.94
62	122.70	148.08	181.43	252.88
63	132.40	160.21	196.63	274.87
64	142.10	172.32	211.88	296.86
65	151.82	184.44	227.09	318.82
66	169.97	207.10	255.52	351.24
67	188.15	229.72	283.92	383.64
68	206.28	252.37	312.32	416.05
69	224.42	274.99	340.72	448.43
70	242.60	297.65	369.13	480.85
71	275.78	338.95	420.86	534.48
72	308.95	380.29	472.61	588.04
73	342.13	421.60	524.32	641.64
74	375.30	462.91	576.06	695.23
75	408.48	504.19	627.78	748.81
76	439.27	542.30	675.16	805.44
77	470.09	580.39	722.53	862.04
78	500.89	618.49	769.91	918.71
79	531.71	656.58	817.26	975.30
80	562.51	694.68	864.64	1031.94
81	604.25	746.56	929.52	1109.68
82	645.98	798.43	994.37	1187.40
83	687.71	850.30	1059.24	1265.16
84	729.41	902.17	1124.09	1342.90
85+	771.14	954.08	1188.97	1420.63

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	42.48	49.30	58.80	81.62
45-49	60.67	70.43	84.00	116.58
50	77.71	91.24	110.04	155.21
51	80.88	95.12	114.90	162.49
52	84.00	99.01	119.76	169.74
53	87.18	102.90	124.64	177.02
54	90.34	106.78	129.50	184.30
55	93.49	110.66	134.39	191.59
56	99.26	117.76	143.26	204.85
57	105.01	124.86	152.15	218.08
58	110.80	131.95	161.02	231.35
59	116.57	139.02	169.91	244.60
60	122.32	146.15	178.78	257.82
61	133.22	159.62	195.71	283.28
62	144.14	173.12	212.64	308.71
63	155.02	186.62	229.60	334.15
64	165.94	200.12	246.53	359.60
65	176.84	213.60	263.46	385.04
66	197.00	238.60	294.79	421.84
67	217.20	263.57	326.10	458.64
68	237.36	288.52	357.42	495.43
69	257.56	313.51	388.70	532.24
70	277.74	338.47	420.04	569.00
71	318.38	388.76	482.95	629.40
72	359.04	439.01	545.88	689.76
73	399.71	489.24	608.82	750.17
74	440.34	539.53	671.74	810.54
75	481.01	589.78	734.65	870.94
76	515.50	632.22	787.44	933.68
77	550.02	674.60	840.19	996.49
78	584.48	717.05	893.00	1059.28
79	618.98	759.47	945.78	1122.07
80	653.48	801.90	998.57	1184.86
81	701.08	860.71	1072.09	1272.47
82	748.70	919.52	1145.62	1360.07
83	796.32	978.35	1219.12	1447.68
84	843.95	1037.15	1292.65	1535.28
85+	891.54	1095.96	1366.19	1622.90

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	63.40	76.08	92.56	125.50
45-49	90.55	108.67	132.22	179.32
50	109.76	132.70	162.32	221.33
51	113.98	137.96	168.98	230.64
52	118.18	143.24	175.60	239.94
53	122.39	148.54	182.20	249.24
54	126.56	153.80	188.86	258.58
55	130.78	159.08	195.47	267.89
56	137.51	167.50	206.08	282.72
57	144.29	175.97	216.66	297.55
58	151.01	184.42	227.29	312.43
59	157.74	192.89	237.88	327.28
60	164.51	201.34	248.48	342.11
61	178.03	218.30	269.87	372.13
62	191.56	235.32	291.23	402.19
63	205.08	252.29	312.59	432.20
64	218.60	269.32	333.98	462.26
65	232.13	286.28	355.36	492.29
66	254.03	313.78	389.87	528.52
67	275.92	341.30	424.44	564.72
68	297.79	368.80	458.98	600.94
69	319.68	396.32	493.50	637.14
70	341.60	423.82	528.04	673.37
71	376.90	468.14	583.58	732.24
72	412.19	512.42	639.16	791.14
73	447.47	556.74	694.68	850.04
74	482.76	601.06	750.23	908.96
75	518.04	645.37	805.81	967.86
76	542.38	675.55	843.24	1012.80
77	566.71	705.73	880.74	1057.74
78	591.04	735.95	918.16	1102.73
79	615.38	766.10	955.64	1147.67
80	639.68	796.32	993.13	1192.61
81	672.92	837.84	1045.02	1255.16
82	706.18	879.42	1096.92	1317.66
83	739.40	920.95	1148.84	1380.22
84	772.66	962.50	1200.74	1442.74
85+	805.91	1004.06	1252.67	1505.29

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	82.78	98.80	120.94	174.37
45-49	118.22	141.14	172.78	249.08
50	144.55	173.48	213.25	309.43
51	149.81	179.96	221.44	321.66
52	155.09	186.50	229.56	333.90
53	160.31	192.98	237.71	346.12
54	165.59	199.49	245.88	358.36
55	170.84	206.00	254.03	370.60
56	179.11	216.24	266.84	389.77
57	187.38	226.48	279.66	408.94
58	195.70	236.65	292.46	428.16
59	203.95	246.89	305.28	447.32
60	212.26	257.11	318.11	466.52
61	228.38	277.10	343.20	504.26
62	244.51	297.11	368.34	542.04
63	260.63	317.14	393.41	579.78
64	276.76	337.13	418.56	617.56
65	292.92	357.12	443.69	655.31
66	318.95	389.36	484.13	700.13
67	344.94	421.61	524.54	744.94
68	371.02	453.85	565.00	789.79
69	397.01	486.10	605.44	834.59
70	423.04	518.36	645.90	879.42
71	474.52	582.04	725.70	951.73
72	525.95	645.73	805.49	1024.06
73	577.42	709.40	885.29	1096.33
74	628.86	773.09	965.08	1168.66
75	680.34	836.76	1044.88	1240.97
76	709.84	873.01	1089.91	1294.55
77	739.30	909.26	1134.90	1348.10
78	768.79	945.53	1179.95	1401.68
79	798.28	981.77	1224.98	1455.24
80	827.77	1018.01	1270.02	1508.82
81	870.02	1070.20	1335.23	1586.47
82	912.28	1122.38	1400.40	1664.11
83	954.59	1174.54	1465.58	1741.79
84	996.84	1226.75	1530.76	1819.44
85+	1039.13	1278.92	1595.98	1897.09

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	46.69	55.27	66.44	87.88
45-49	66.68	78.95	94.92	125.58
50	83.64	100.12	121.39	162.40
51	87.46	104.90	127.40	170.77
52	91.26	109.69	133.39	179.20
53	95.04	114.47	139.44	187.60
54	98.87	119.26	145.44	196.01
55	102.66	124.04	151.44	204.40
56	109.15	132.14	161.60	218.63
57	115.64	140.28	171.80	232.87
58	122.11	148.40	182.02	247.10
59	128.62	156.53	192.18	261.35
60	135.11	164.64	202.38	275.58
61	147.70	180.43	222.25	303.44
62	160.27	196.26	242.15	331.32
63	172.85	212.08	262.02	359.26
64	185.42	227.90	281.92	387.11
65	198.01	243.70	301.79	414.98
66	219.47	270.68	335.68	451.62
67	240.97	297.65	369.60	488.29
68	262.45	324.67	403.46	524.96
69	283.93	351.64	437.34	561.59
70	305.42	378.60	471.24	598.26
71	340.07	422.10	525.77	657.29
72	374.68	465.60	580.27	716.30
73	409.34	509.06	634.79	775.34
74	443.95	552.54	689.29	834.37
75	478.62	596.03	743.83	893.35
76	505.69	629.66	785.60	943.52
77	532.75	663.31	827.42	993.72
78	559.87	696.95	869.20	1043.84
79	586.94	730.64	910.99	1094.03
80	614.03	764.27	952.81	1144.19
81	649.20	808.20	1007.75	1210.38
82	684.37	852.18	1062.70	1276.57
83	719.58	896.15	1117.67	1342.78
84	754.75	940.13	1172.62	1408.97
85+	789.94	984.08	1227.55	1475.14

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	62.93	74.41	90.31	128.52
45-49	89.94	106.27	129.01	183.60
50	113.88	135.70	165.79	238.38
51	118.76	141.71	173.33	249.67
52	123.62	147.71	180.88	260.98
53	128.52	153.72	188.40	272.27
54	133.38	159.72	195.95	283.58
55	138.26	165.73	203.48	294.86
56	146.32	175.70	215.95	313.51
57	154.39	185.62	228.41	332.14
58	162.43	195.58	240.86	350.80
59	170.51	205.49	253.32	369.42
60	178.56	215.45	265.79	388.07
61	193.70	234.23	289.33	423.47
62	208.86	252.98	312.92	458.89
63	224.00	271.76	336.48	494.28
64	239.12	290.51	360.06	529.70
65	254.28	309.30	383.63	565.12
66	279.91	341.05	423.46	610.60
67	305.53	372.80	463.26	656.09
68	331.16	404.54	503.08	701.53
69	356.78	436.30	542.88	747.04
70	382.44	468.05	582.71	792.50
71	432.78	530.36	660.78	865.06
72	483.12	592.63	738.82	937.62
73	533.47	654.95	816.86	1010.12
74	583.81	717.26	894.95	1082.69
75	634.20	779.57	973.01	1155.23
76	666.91	819.84	1023.06	1214.83
77	699.64	860.11	1073.15	1274.39
78	732.35	900.35	1123.25	1333.99
79	765.11	940.61	1173.34	1393.58
80	797.83	980.89	1223.41	1453.14
81	842.36	1035.85	1292.10	1534.98
82	886.84	1090.80	1360.76	1616.81
83	931.39	1145.80	1429.46	1698.67
84	975.86	1200.74	1498.15	1780.50
85+	1020.41	1255.74	1566.83	1862.33

Policy Form Number FCLTC-PA 2000

Premium Adjustment Factors Attributable
to Increasing Elimination Periods

Days in Elimination Period			
<u>20</u>	<u>60</u>	<u>90</u>	<u>180</u>
1.15	1.07	1.00	0.90

Policy Form Number FCLTC-PA 2000

Premium Adjustment Factors Attributable to Optional Riders

Issue Age	FCSWP 2000 Spousal Waiver of Premium	FCSSP 2000 Survivor Spouse Paid-Up	FCROP 2000 Return of Premium	FCNFBR 2000 Nonforfeiture Benefit
18-39	0.01	0.12	1.08	1.20
40-49	0.01	0.12	1.08	1.19
50-54	0.01	0.12	1.08	1.17
55	0.02	0.12	1.12	1.17
56-59	0.02	0.11	1.12	1.17
60-64	0.02	0.11	1.12	1.15
65	0.03	0.11	1.14	1.15
66-69	0.03	0.09	1.14	1.15
70	0.04	0.07	1.15	1.13
71	0.04	0.07	1.18	1.13
72	0.04	0.07	1.21	1.13
73	0.04	0.07	1.23	1.13
74	0.04	0.07	1.26	1.13
75	0.06	0.06	1.29	1.13
76	0.06	0.06	1.31	1.13
77	0.06	0.06	1.34	1.13
78	0.06	0.06	1.36	1.13
79	0.06	0.06	1.39	1.13
>=80	0.11	0.04	1.41	1.11

Discounts

Spousal Discount	15%
Preferred Discount	10%

Benefit Period	FCROB 2000 Restoration of Benefit	FCSSB 2000 Spousal Shared Benefit
2 Years	1.08	N/A
3 Years	1.05	0.12
5 Years	1.04	0.08
Lifetime	N/A	N/A

Premium Calculation Example

$$A = \begin{array}{l} \text{Annual Base Premium} \\ \text{Base Premium based upon possible choice of:} \\ \text{Home Health Care Increase Rider and/or} \\ \text{Simple Inflation Protection Rider and/or} \\ \text{Compound Inflation Protection Rider} \\ * \\ \text{Elimination Period Factor} \end{array}$$

$$B = \begin{array}{l} A * \text{Survivor Spouse Paid-Up Factor} \\ \text{(if chosen by Insured)} \\ + \\ A * \text{Spousal Shared Benefit Factor} \\ \text{(if chosen by Insured)} \\ + \\ A * \text{Spousal Waiver of Premium Factor} \\ \text{(if chosen by Insured)} \end{array}$$

$$C = \begin{array}{l} (A + B) * \text{Restoration of Benefit Factor} \\ \text{(if chosen by Insured)} \\ * \\ \text{Nonforfeiture Benefit Factor or} \\ \text{Return of Premium Factor} \\ \text{(if chosen by Insured)} \end{array}$$

$$C = \text{Total Gross Premium}$$

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Supporting Document Schedules

Satisfied - Item:	Transmittal Letter (A&H)
Comments:	
Attachment(s):	Cover Letter - Gen 12 PA - 2021.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Actuarial Certification (A&H)
Bypass Reason:	This is not a new form filing; it is a rate increase filing on a closed block of business. These policies are no longer being sold in any jurisdiction.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum and Explanatory Information (A&H)
Comments:	
Attachment(s):	Actuarial Memorandum - Gen 12 - PA - 2021.pdf COF PA Exhibits 2021.xlsx
Item Status:	
Status Date:	

Bypassed - Item:	Advertisements (A&H)
Bypass Reason:	This is a rate increase filing on a closed block of business. These policies are no longer being sold in any jurisdiction.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Authorization to File (A&H)
Comments:	
Attachment(s):	COF Authorization Letter - SignedNL 10.22.2019.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Insert Page Explanation (A&H)
Bypass Reason:	This filing contains no insert pages.
Attachment(s):	

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Item Status:	
Status Date:	
Bypassed - Item:	Rate Table (A&H)
Bypass Reason:	This is not a new form filing. Revised rates are included in the Rate/Rule Schedule tab.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Replacement Form with Highlighted Changes (A&H)
Bypass Reason:	This filing contains no changes to approved forms.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Advertisement Compliance Certification
Bypass Reason:	This is a closed block of business.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Reserve Calculation (A&H)
Bypass Reason:	We do not believe this rate increase is substantial.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Variability Explanation (A&H)
Bypass Reason:	This is not a form filing.
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Sample Policyholder Notification Letter
Comments:	
Attachment(s):	Sample COF rate increase letter - 2019.pdf
Item Status:	
Status Date:	

SERFF Tracking #:	UHAS-132946160	State Tracking #:	UHAS-132946160	Company Tracking #:	
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State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Satisfied - Item:	Rate Increase History
Comments:	
Attachment(s):	COF Filing Status Round 5 Gen 12.xlsx
Item Status:	
Status Date:	

SERFF Tracking #:	UHAS-132946160	State Tracking #:	UHAS-132946160	Company Tracking #:	
State:	Pennsylvania	Filing Company:	Catholic Order of Foresters		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified				
Product Name:	FCNH, FCLTC, FCLTC 2000				
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/				

Attachment COF PA Exhibits 2021.xlsx is not a PDF document and cannot be reproduced here.

Attachment COF Filing Status Round 5 Gen 12.xlsx is not a PDF document and cannot be reproduced here.

August 30, 2021

Jessica Altman
Commissioner
Pennsylvania Insurance Department
Commonwealth of Pennsylvania
1326 Strawberry Square, 13th Floor
Harrisburg, Pennsylvania 17120

RE: Catholic Order of Foresters
NAIC # 57487
SERFF Tracking # UHAS-132946160
Policy Forms: FCNH, FCLTC, FCLTC 2000
Requested 39.99% Rate Increase and Rate Stability Reporting for Prior Rate Increase

Dear Commissioner Altman:

This referenced filing is being submitted on behalf of Catholic Order of Foresters for your review. This filing includes a rate increase request, as well as the information to satisfy the requirement to present actual and projected experience for year one of the required three years following implementation of the latest rate increase, as well as years one and two following implementation of the prior rate increase (please note the prior follow-up filing included only experience prior to the implementation of that increase).

These policies are existing individual policy forms providing long-term care coverage. They were issued from 1998 through 2004 and are no longer being marketed in any jurisdiction.

Rate Increase Filing

Please find the attached actuarial documents to support the requested 39.99% rate increase on the referenced policy forms and attendant riders. The rate increase is needed to offset a higher-than-expected lifetime loss ratio caused by higher-than-expected persistency. Some of these policies are subject to Rate Stabilization requirements. Compliance with the 58/85 loss ratio after the rate increase is demonstrated in Section 24 of the actuarial memorandum. The deviation in both voluntary lapses and mortality exceeds the previously established moderately adverse conditions for these policy forms.

The proposed effective date of the requested increase is as soon as possible following approval and fulfillment of all statutory and contractual requirements and will be at least one year from the implementation of the previous rate increase.

As a fraternal organization, Catholic Order of Foresters is very concerned for their policyholders and, as a result, the company will offer policyholders several options to reduce their benefits in

order to allow them the flexibility to reduce the effect of the premium increase or maintain their current premium level.

In addition, the company will provide the contingent benefit upon lapse benefit to policyholders who did not purchase the optional nonforfeiture benefit.

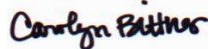
Rate Stability Experience Filing

The projection presented in the actuarial memorandum represents year one of the required three years of reporting following implementation of the most recent rate increase, as well as years one and two following the implementation of the prior rate increase. Filing UHAS-132269534 was approved 5/23/2020 and was based on data through 12/31/2018, and filing UHAS-131777391 was approved 8/26/2019 and was based on data through 12/31/2017. The attached Rate Stability Exhibit shows the projected values for 2019 and 2020 from the most recent filing and compares them to the actual results through 12/31/2020. Please note the most recent rate increase of 16.67% became effective 12/1/2020.

The analyses and projections included in this filing continue to demonstrate that the rate increase was justified. The justification for the rate increase was based on higher-than-expected persistency. The actual lapse and mortality rates deviate from the original pricing assumptions and exceed moderately adverse conditions.

If you have any questions or would like to discuss any of the materials included in this filing, please feel free to contact me by telephone (262) 510-5776 or email at cbittner@uhasinc.com.

Sincerely,



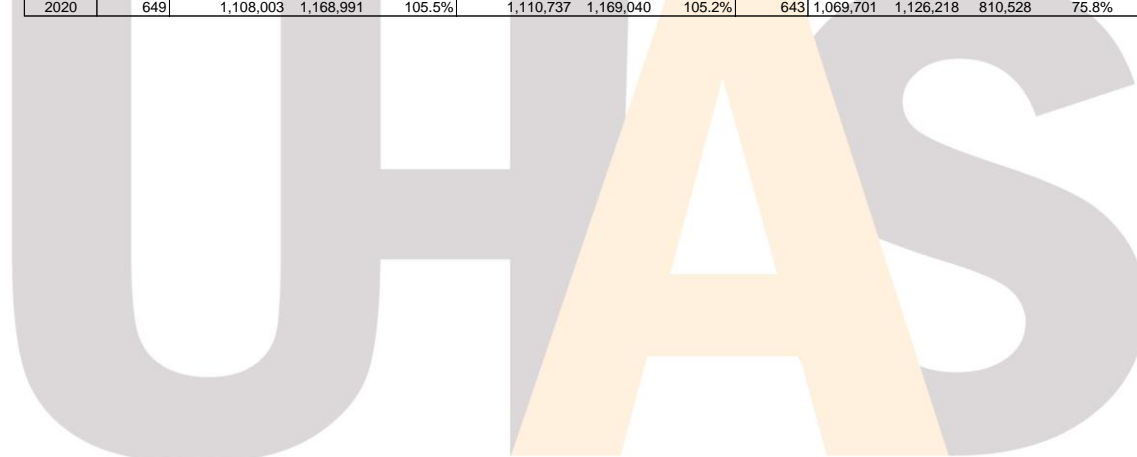
Carolyn Bittner, FSA, MAAA
Consulting Actuary

Rate Stability Exhibit for PA

Nationwide Experience

FCNH, FCLTC, FCLTC 2000

FCMR, FCLEI, FCLET 2000														
Calendar Year	Filed Projections Approved 5/23/2020 (Claims by Inc Yr)							Actual Experience (Claims by Inc Yr)						
	Life Years	With No Rate Increase			With Proposed 16.67% Rate Increase Effective 12/1/2020			Life Years	With Actual 20% Rate Increase Effective 2/1/2017, 16.67% Effective 6/1/2018, 20% Effective 12/1/2019, and 16.67% Effective 12/1/2020					
		Earned Premium	Incurred Claims	Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio		Collected Premium		Incurred Claims	Loss Ratio		
									Actual	PA RateLvl		Actual	PA RateLvl	
2019	673	1,018,003	1,042,919	102.4%	1,018,003	1,042,922	102.4%	673	1,022,083	1,021,791	584,550	57.2%	57.2%	
2020	649	1,108,003	1,168,991	105.5%	1,110,737	1,169,040	105.2%	643	1,069,701	1,126,218	810,528	75.8%	72.0%	



HEALTH ACTUARIES

A DIVISION OF RISK STRATEGIES



Catholic Order of Foresters

Actuarial Memorandum

Rate Increase for Individual Long Term Care Policy Forms FCNH, FCLTC, FCLTC 2000

1. Scope and Purpose of Filing

The purpose of this rate filing is to request a revision on the above-referenced policy forms and any associated riders (please see Exhibit A for a list of riders) and to demonstrate that, after the requested rate increase, applicable loss ratio requirements are met. It is not intended to be used for any other purpose.

The filing applies to existing policyholders only, as this is a closed block of business. The rate increase is needed in order to offset the higher-than-expected lifetime loss ratios caused by higher-than-expected policyholder persistency.

2. Requested Rate Action

The company is requesting a level rate increase of 39.99% on all forms and riders.

3. Status

The policy forms affected represent a closed block of business.

4. Description of Benefits

All plans are intended to be tax-qualified, and benefits become payable when the insured either requires substantial assistance with at least 2 of 6 ADLs (bathing, dressing, continence, eating, toileting and transferring) for 90 days or requires substantial supervision due to severe cognitive impairment.

FCNH

The base plan is administered on a "pool of money" basis, where the pool of money is calculated as the nursing home daily maximum times the benefit period in days. The insured is provided with the services of a quality care coordinator, who evaluates the insured's functional abilities, prepares a Plan of Care, and coordinates the care to be received. An insured who qualifies for benefits is eligible to receive any nursing home or assisted living facility services that are included in the Plan of Care developed by the quality care coordinator. A 21-day per year nursing home bed reservation benefit could be included in the Plan of Care, or hospice care could be provided. Premiums are waived after the policyholder has been receiving covered care for 90 days and as long as the person continues to receive covered benefits.

Optional rider FCIPR increases the daily maximum and the maximum policy benefit by 5%, compounded annually, on each policy anniversary.

Optional rider FCNFBR provides, after 3 years inforce, the cumulative premiums paid to be available upon lapse to continue coverage for a shortened benefit period (SBP). The SBP (in days) is calculated as the cumulative premiums paid divided by the nursing home daily maximum, subject to a minimum of 30 days

FCLTC

The base plan covers nursing home, assisted living, and hospice care up to the daily benefit and home health care and adult day care up to half of the daily benefit. It is administered on a "pool of money" basis, where the pool of money is calculated as the nursing home daily maximum times the benefit period in days. The insured is provided with the services of a quality care coordinator, who evaluates the insured's functional abilities, prepares a Plan of Care, and coordinates the care to be received. An insured who qualifies for benefits is eligible to receive all long term care services that are included in the Plan of Care developed by the quality care coordinator. This could include nursing home care, assisted living facility care, home health care or adult day care. A 21-day per year nursing home bed reservation benefit could be included in the Plan of Care, or hospice care could be provided. Respite care could be provided, up to 21 days per year. Other alternate services could be included, if agreed to by all parties. There is also a "caregiver training benefit" to pay for the costs of an informal caregiver in receiving training, thus making formal long term care services unnecessary. This benefit is subject to a \$500 lifetime maximum. Premiums are waived after the policyholder has been receiving covered care for 90 days and as long as the person continues to receive covered benefits.

Optional rider FCHHIR doubles the maximum daily benefit payable for home health care and adult day care.

Optional rider FCIPR increases the daily maximum and the maximum policy benefit by 5%, compounded annually, on each policy anniversary.

Optional rider FCNFBR provides, after 3 years inforce, the cumulative premiums paid to be available upon lapse to continue coverage for a shortened benefit period (SBP). The SBP (in days) is calculated as the cumulative premiums paid divided by the nursing home daily maximum, subject to a minimum of 30 days

FCLTC 2000

The base plan covers long-term facility care, assisted living facility care, and care in a hospital long term care unit up to the daily benefit amount and home health care and adult day care up to half of the daily benefit. There is an alternative care benefit that covers expenses incurred as agreed upon by the insured and the Order, a caregiver training benefit that covers expenses incurred up to \$500 over the life of the policy, and a respite care benefit equal to the expenses incurred up to 21 times the daily benefit amount per calendar year. Premiums are waived after the policyholder has been receiving covered care for 90 days and as long as the person continues to receive covered benefits.

Optional rider FCHHIR 2000 doubles the maximum daily benefit payable for home health care and adult day care.

Optional rider FCCIP 2000 increases the daily benefit amount and unused policy maximum by 5%, compounded annually, on each policy anniversary.

Optional rider FCSIP 2000 increases the daily benefit amount and unused policy maximum by 5% of the original amount on each policy anniversary.

Optional rider FCGPIP 2000 gives the insured the option to purchase additional coverage in order to increase the daily benefit and policy maximum amounts by an amount based on the CPI for medical expenses every 2 years (as long as the insured is not receiving benefits and has not declined two consecutive offers).

Optional rider FCNFBR 2000 provides continued coverage with a shortened benefit period and no further inflation increases for policies that lapse after 3 years.

Optional rider FCROP 2000 returns a percentage of the total premiums paid, less any benefits paid, with the percentage based upon the number of years the policy has been in force.

Optional rider FCROB 2000 restores the policy maximum to the Initial Policy Maximum if the policyholder has not received Qualified Long-Term Care services for at least 180 consecutive days; is not eligible for benefits, and is not receiving benefits. The policy maximum may be restored an unlimited number of times.

Optional rider FCSSB 2000 allows spouses who are both covered under FCLTC 2000 policies with the same benefits to combine their maximum lifetime benefits so that the first spouse to exhaust benefits under one policy may then start using benefits under the second spouse's policy

Optional rider FCSWP 2000 provides for the policyholder's spouse (who is also covered under an FCLTC 2000 policy) to have their premium waived while the policyholder is confined to a Long-Term Care Facility or Assisted Living Facility, beginning after at least 90 days of confinement.

Optional rider FCSSP 2000 provides for the insured's policy to become paid-up upon the death of their spouse (who was also covered under an FCLTC 2000 policy), provided both policies were in force for at least 10 years.

5. Renewability Clause

The policy forms are guaranteed renewable for the life of the policyholder.

6. Applicability

The premium increase contained in this memorandum will be applicable to all insureds of the policy forms and riders described in Section 4 and, since this is a closed block, the rate increase will apply only to existing policyholders.

7. Morbidity

The morbidity assumptions used in the actuarial analysis and the attached projection exhibits are based on a review of the historical claim experience combined with industry data, and the experience of the entire company's long-term care block was combined for credibility purposes. This morbidity study shows results consistent with the original pricing assumptions, and therefore original morbidity assumptions are used for projected claims. The projected claims were produced by a first principles model, using industry-based incidence, continuance, and salvage assumptions with adjustments made to replicate the original morbidity assumptions. These original morbidity assumptions continue to reflect the company's current best estimate of future morbidity and are consistent with the gross premium valuation testing.

8. Mortality

Future projections are based on the assumed mortality per the Annuity 2000 table, adjusted by 90% for active lives and 200% for disabled lives.

9. Persistency

The assumed persistency is the sum of the following:

- Non-death (voluntary lapse and benefit exhaustion) termination; and,
- Death rates, as described in Section 8.

A total termination study was completed by comparing the difference between the actual total termination rates observed on the policy forms and the assumed mortality described in the previous section. The resulting difference was then attributed to the voluntary lapses and, based on this analysis, future projections are based on an assumed voluntary lapse rate of 0.5% for all future years. Please see section 23 for the results of this experience study. The result of this assumption development process is that the assumed total terminations reflect the actual experienced total termination rates. No additional shock lapses or anti-selection factors were assumed as a result of the proposed rate increase.

10. Expenses

This filing does not include projected expenses, nor is any part of the requested rate increase intended to cover greater-than-expected expenses.

11. Marketing Method

The referenced policy forms were marketed to individuals by licensed agents.

12. Underwriting

All policies subject to the requested rate increase were subject to full medical underwriting in accordance with company standards in place at the time of issue. Since Catholic Order of Foresters has not sold long-term care since 2005, all inforce policies are now past the initial select period, so no further underwriting wear-off is reflected in the projections.

13. Premium Classes

Premiums vary by benefit period, elimination period, optional rider selection, state of issue, premium mode, risk class, and the issue age of the policyholder. Discounts were available for certain members of the clergy, members of associations that negotiated a discount with the company, and individuals whose spouse also purchased a policy.

14. Issue Age Range

These forms were available to individuals at ages 18-84. Premiums are based on the policyholder's age at issue.

15. Area Factors

Premiums do not vary within a state by geographic region.

16. Average Annual Premium

Please see Exhibit B for statewide and nationwide average annualized premium as of 12/31/2020.

17. Premium Modalization Rules

The filed premiums are multiplied by the modal factors shown below in order to create modal billed premiums.

<u>Billing Mode</u>	<u>Factor</u>
Annual	1.0000
Semi-Annual	0.5200
Quarterly	0.2650
Monthly PAC on FCLTC 2000	0.0865
Monthly PAC on all other forms	0.0875

18. Trend Assumptions – Medical and Insurance

Benefits are capped by the daily benefit limit, and daily benefit limits are generally below the daily charge amounts. Consequently, we have assumed no medical trend in the attached projections.

19. Minimum Required Loss Ratio for the Forms

The minimum loss ratio for the referenced policy forms is 60%.

20. Anticipated Loss Ratio

The anticipated loss ratio after the proposed premium rate increase shown in Section 24 meets the applicable requirement.

21. Distribution of Business

Please see Exhibit C for the distribution of in force business by premium class.

22. Contingency and Risk Margins

The revised premium rates do not contain an explicit margin for contingency.

23. Experience on the Forms (Past and Future Anticipated)

Please see Exhibit D for the historical and projected future experience.

For credibility purposes, the historical Catholic Order of Foresters nationwide experience was combined. Incurred claims reflect claims incurred through 12/31/2020 and paid through 6/30/2021, and the claim reserve as of 6/30/2021. Both payments and reserves have been discounted back to the year of incurral using the valuation interest rate. Please note that collected premiums were used as estimates for the historical earned premiums.

The valuation interest rate of 4.50% was used to accumulate the historical experience and discount the future experience to 12/31/2020. The use of the valuation interest rate is consistent with the rate stability model regulation.

The following table shows the results of the total termination study for policy durations five and later. As described in Section 9, a total termination study was completed by comparing the difference between the actual total termination rates observed on the policy forms through 12/31/2020 and the assumed mortality. The resulting difference was then attributed to the voluntary lapses, which was 0.47%. Because of the low level of total terminations, a slightly higher lapse rate of 0.50% was assumed, and the 0.50% lapse rate is used for this premium rate increase filing and the projections accompanying this filing.

Lapse Experience Analysis for Policy Durations 5+				
Original Lapse Assumption	Actual Lapse	Actual-to-Original Lapse	Revised Lapse Assumption	Actual-to-Revised Lapse
1% - 4%	0.47%	12% - 47%	0.50%	94%

24. Lifetime Loss Ratio

Exhibit D details the historical and projected future experience. The following summarizes the lifetime loss ratio calculation detailed in the exhibit and also demonstrates how the experience with the proposed rate increase meets the 58/85 test using present values at the valuation interest rate (4.5%):

Assuming 39.99% Rate Increase

	<u>Present Values at 4.5%</u>		
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Historical	31,154,107	11,471,141	36.8%
Projected	13,496,746	33,368,610	247.2%
Total	44,650,853	44,839,752	100.4%

Without Proposed 39.99% Rate Increase

	<u>Present Values at 4.5%</u>		
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Historical	31,154,107	11,471,141	36.8%
Projected	10,067,135	32,541,981	323.2%
Total	41,221,243	44,013,122	106.8%

58/85 Test

$$58\% \times 35,084,896 = 20,349,240$$

$$44,650,853 - 35,084,896 = 9,565,957$$

$$85\% \times 9,565,957 = 8,131,063$$

$$20,349,240 + 8,131,063 = 28,480,303$$

$$44,839,752 > 28,480,303$$

25. History of Rate Adjustments

<u>Approval Date</u>	<u>Rate Adjustment</u>
1/18/2000	Complete repricing of FCLTC
11/9/2016	20.00% Increase
3/6/2018	16.67% Increase
8/26/2019	20.00% Increase
5/23/2020	16.67% Increase

26. Number of Policyholders

Please see Exhibit B for the statewide and nationwide policy counts as of 12/31/2020.

27. Proposed Effective Date

Following department approval, the requested rate increase will be implemented as soon as possible after the required notice period. The projections assume an implementation date of 12/01/2021.

28. Data Reliance and Data Quality

All referenced analyses and projections were performed under the direction of a colleague. I have reviewed the results of the analyses and projections for reasonableness. In performing the analysis, preparing this filing, and rendering the actuarial opinion below, I relied on data provided to me by Catholic Order of Foresters. I reviewed the data for reasonableness and consistency, but I did not perform a detailed audit of the data. Based on my review of the data, the data are appropriate for the purpose used, and to the best of my knowledge the data contain no material data quality issues.

29. Actuarial Certification

I am a Fellow of the Society of Actuaries and a Member of the American Academy of Actuaries, and I meet the Qualification Standards of the American Academy of Actuaries to render this actuarial opinion.

This filing complies with all applicable Actuarial Standards of Practice, including Actuarial Standards of Practice No. 8 "Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health Benefits," No. 18 "Long-Term Care Insurance," and No. 23 "Data Quality."

I hereby certify that, to the best of my knowledge and judgment, this rate submission is in compliance with the applicable laws and regulations of the State of Pennsylvania, including 89a.118.

In forming my opinion, policy design, underwriting and claims adjudication practices have been taken into consideration.

In my opinion, the rates are not excessive or unfairly discriminatory. This filing will enhance premium adequacy but may not be sufficient to prevent future rate action. Given this, I cannot certify the proposed rates to be sustainable over the life of the form with no future premium increases or that they would be sufficient to cover anticipate costs under moderately adverse conditions.



Carolyn Bittner, FSA, MAAA
Consulting Actuary
UHAS, A Division of Risk Strategies

August 30, 2021
Date

Attachments:Exhibits

Exhibit A:	List of Associated Riders
Exhibit B:	In Force Counts and Annualized Premium
Exhibit C:	Distribution of In Force Policies
Exhibit D:	Historical and Projected Experience

Premium Rate Sheets

FCNH	Current Rates
	Proposed Rates
	Premium Adjustment Factors (applicable to both current and proposed rates)
FCLTC	Current Rates
	Proposed Rates
	Premium Adjustment Factors (applicable to both current and proposed rates)
FCLTC 2000	Current Rates
	Proposed Rates
	Premium Adjustment Factors (applicable to both current and proposed rates)

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Exhibit A

List of Associated Riders

FCNH Riders

FCIPR	Optional Inflation Rider
FCNFBR	Optional Non-Forfeiture Rider

FCLTC Riders

FCHHIR	Optional Home Health Care Rider
FCIPR	Optional Inflation Rider
FCNFBR	Optional Non-Forfeiture Rider

FCLTC 2000 Riders

FCHHIR 2000	Home Health Care Increase Rider
FCCIP 2000	5% Compound Inflation Protection Rider
FCSIP 2000	5% Simple Inflation Protection Rider
FCGPIP 2000	Guaranteed Purchase Inflation Rider
FCNFBR 2000	Nonforfeiture Benefit Rider
FCROP 2000	Return of Premium Rider
FCROB 2000	Restoration of Benefits Rider
FCSSB 2000	Spousal Shared Benefit Rider
FCSWP 2000	Spousal Waiver of Premium Rider
FCSSP 2000	Survivor Spouse Paid-Up Rider

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Exhibit B
In Force Counts and Annualized Premium

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In Force Data as of 12/31/2020

		Average Annualized Premium		
		Annualized	Policies in	After
		Premium	Force	Proposed
				39.99%
PA	FCNH	0	0	
	FCLTC	3,400	2	1,700
	<u>FCLTC 2000</u>	<u>14,197</u>	<u>6</u>	<u>2,366</u>
	Total	17,597	8	2,200
Nationwide	FCNH	29,802	20	1,490
	FCLTC	116,306	80	1,454
	<u>FCLTC 2000</u>	<u>960,580</u>	<u>528</u>	<u>1,819</u>
	Total	1,106,687	628	1,762

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Exhibit C
Distribution of In Force Policies

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Distribution of Policies In Force Nationwide as of 12/31/2020
FCNH, FCLTC, FCLTC 2000

Issue Age	Dist	Issue Age	Dist	Benefit Period	Dist	Discount	Pols With
29	0.2%	58	4.9%	2 Years	8.0%	Association	20.7%
30	0.0%	59	4.5%	3 Years	27.5%	Clergy	4.3%
31	0.0%	60	4.9%	5 Years	42.0%	Spousal	81.5%
32	0.0%	61	4.5%	<u>Lifetime</u>	<u>22.5%</u>		
33	0.0%	62	4.1%	Total	100.0%		
34	0.2%	63	3.2%				
35	0.2%	64	5.7%	Elimination Period	Dist		
36	0.0%	65	4.3%	20 Day	15.4%		
37	0.0%	66	3.2%	60 Day	11.3%		
38	0.0%	67	3.0%	90 Day	70.9%		
39	0.3%	68	2.4%	<u>180 Day</u>	<u>2.4%</u>		
40	0.5%	69	1.4%	Total	100.0%		
41	0.6%	70	1.1%				
42	0.3%	71	0.8%	Premium Mode	Dist		
43	0.3%	72	0.6%	Annual	57.2%		
44	1.3%	73	0.5%	Semi-Annual	5.7%		
45	0.5%	74	0.3%	Quarterly	6.4%		
46	1.4%	75	0.0%	<u>Monthly</u>	<u>30.7%</u>		
47	1.0%	76	0.3%	Total	100.0%		
48	2.7%	77	0.0%				
49	4.8%	78	0.0%	Risk Class	Dist		
50	2.5%	79	0.0%	Preferred	68.9%		
51	3.3%	80	0.0%	Standard	30.9%		
52	3.3%	81	0.0%	Substandard I	0.2%		
53	4.8%	82	0.2%	<u>Substandard II</u>	<u>0.0%</u>		
54	5.7%	83	0.0%	Total	100.0%		
55	5.9%	84	0.0%				
56	5.4%	85	0.0%	Optional Rider	Pols With		
57	4.8%			HHC Increase	48.7%		
		Total	100.0%	5% Compound Inflation	53.2%		
				5% Simple Inflation	15.9%		
				Guaranteed Purchase Inflation	30.9%		
				Nonforfeiture Benefit	0.6%		
				Return of Premium	42.4%		
				Restoration of Benefits	9.7%		
				Spousal Shared Benefit	22.0%		
				Spousal Waiver of Premium	18.6%		
				Survivor Spouse Paid-Up	7.2%		

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Exhibit D

Historical and Projected Experience

Nationwide Experience
FCNH, FCLTC, FCLTC 2000
(Reflects Claims Paid and Reserves Held As Of 6/30/2021)

Calendar Year	Life Years	Without Proposed Rate Increase								With Proposed 39.99% Rate Increase Effective 12/1/2021		
		Premium*		By Incurral Year			Incurred Loss Ratio		PA RateLvl	By Incurral Year		Incurred Loss Ratio
		Actual	PA RateLvl	Pd Clms	Clim Res	Inc Clms	Actual	PA RateLvl		Premium*	Year	
										PA RateLvl	Inc Clms	PA RateLvl
1998	7	26,884	26,884	0	0	0	0.0%	0.0%		26,884	0	0.0%
1999	65	116,684	116,684	0	0	0	0.0%	0.0%		116,684	0	0.0%
2000	169	280,636	280,636	0	0	0	0.0%	0.0%		280,636	0	0.0%
2001	368	520,048	520,048	0	0	0	0.0%	0.0%		520,048	0	0.0%
2002	595	829,398	829,398	0	0	0	0.0%	0.0%		829,398	0	0.0%
2003	831	1,043,188	1,043,188	80,505	0	80,505	7.7%	7.7%		1,043,188	80,505	7.7%
2004	915	1,074,557	1,074,557	0	0	0	0.0%	0.0%		1,074,557	0	0.0%
2005	902	1,065,845	1,065,845	160,108	0	160,108	15.0%	15.0%		1,065,845	160,108	15.0%
2006	886	1,025,325	1,025,325	116,868	0	116,868	11.4%	11.4%		1,025,325	116,868	11.4%
2007	870	1,010,652	1,010,652	86,000	0	86,000	8.5%	8.5%		1,010,652	86,000	8.5%
2008	857	993,656	993,656	144,354	0	144,354	14.5%	14.5%		993,656	144,354	14.5%
2009	845	955,914	955,914	180,601	0	180,601	18.9%	18.9%		955,914	180,601	18.9%
2010	832	955,064	955,064	391,460	0	391,460	41.0%	41.0%		955,064	391,460	41.0%
2011	819	953,319	953,319	532,380	91,932	624,313	65.5%	65.5%		953,319	624,313	65.5%
2012	810	922,435	922,435	352,945	0	352,945	38.3%	38.3%		922,435	352,945	38.3%
2013	799	903,082	903,082	697,668	0	697,668	77.3%	77.3%		903,082	697,668	77.3%
2014	788	892,958	892,958	583,128	144,574	727,702	81.5%	81.5%		892,958	727,702	81.5%
2015	775	874,661	874,661	1,249,187	368,490	1,617,677	184.9%	184.9%		874,661	1,617,677	184.9%
2016	757	833,611	833,611	828,698	119,940	948,638	113.8%	113.8%		833,611	948,638	113.8%
2017	731	934,225	946,184	435,838	100,565	536,402	57.4%	56.7%		946,184	536,402	56.7%
2018	701	970,571	983,608	508,245	150,430	658,675	67.9%	67.0%		983,608	658,675	67.0%
2019	673	1,022,083	1,021,791	343,079	241,472	584,550	57.2%	57.2%		1,021,791	584,550	57.2%
2020	643	1,069,701	1,126,218	207,035	603,493	810,528	75.8%	72.0%		1,126,218	810,528	72.0%
2021	615		1,205,119			1,250,194		103.7%		1,211,893	1,250,368	103.2%
2022	589		1,188,371			1,368,198		115.1%		1,523,203	1,372,653	90.1%
2023	563		1,118,632			1,504,423		134.5%		1,565,973	1,516,741	96.9%
2024	537		1,048,917			1,636,126		156.0%		1,468,379	1,656,646	112.8%
2025	509		982,280			1,778,057		181.0%		1,375,094	1,806,863	131.4%
2026	481		908,497			1,893,075		208.4%		1,271,805	1,929,978	151.8%
2027	453		838,883			2,006,850		239.2%		1,174,353	2,051,576	174.7%
2028	425		771,116			2,133,722		276.7%		1,079,485	2,185,837	202.5%
2029	397		704,838			2,240,588		317.9%		986,702	2,299,349	233.0%
2030	369		641,444			2,322,649		362.1%		897,958	2,387,196	265.8%
2031	342		580,538			2,399,065		413.2%		812,695	2,468,472	303.7%
2032	315		522,559			2,467,240		472.1%		731,530	2,540,670	347.3%
2033	289		467,735			2,533,453		541.6%		654,783	2,610,018	398.6%
2034	264		416,202			2,543,695		611.2%		582,642	2,622,417	450.1%
2035	239		368,298			2,541,805		690.1%		515,580	2,621,646	508.5%
2036	216		324,063			2,488,111		767.8%		453,656	2,568,076	566.1%
2037	194		283,426			2,443,976		862.3%		396,767	2,523,219	635.9%
2038	173		246,347			2,394,953		972.2%		344,861	2,472,669	717.0%
2039	153		212,607			2,287,292		1075.8%		297,629	2,362,636	793.8%
2040	135		182,245			2,182,985		1197.8%		255,125	2,255,264	884.0%
2041	118		155,194			2,041,575		1315.5%		217,256	2,110,087	971.2%
2042	103		131,348			1,891,376		1440.0%		183,875	1,955,692	1063.6%
2043	89		110,400			1,748,985		1584.2%		154,549	1,808,759	1170.3%
2044	76		92,208			1,579,237		1712.7%		129,083	1,634,131	1266.0%
2045	65		76,566			1,438,176		1878.4%		107,185	1,488,063	1388.3%
2046	55		63,206			1,286,712		2035.7%		88,482	1,331,564	1504.9%
2047	46		51,914			1,148,394		2212.1%		72,674	1,188,294	1635.1%
2048	39		42,391			1,003,463		2367.2%		59,343	1,038,591	1750.1%
2049	32		34,449			867,265		2517.5%		48,225	897,873	1861.8%
2050	27		27,853			756,191		2715.0%		38,991	782,600	2007.1%
2051	22		22,388			641,960		2867.5%		31,341	664,520	2120.3%
2052	18		17,892			548,135		3063.5%		25,048	567,222	2264.6%
2053	14		14,188			460,870		3248.4%		19,861	476,854	2400.9%
2054	12		11,176			382,228		3420.0%		15,646	395,485	2527.7%
2055	9		8,754			317,708		3629.4%		12,255	328,597	2681.4%
2056	7		6,819			258,441		3789.9%		9,546	267,298	2800.1%
2057	6		5,290			212,917		4024.9%		7,405	220,050	2971.4%
2058	5		4,076			173,738		4262.3%		5,706	179,420	3144.3%
2059	4		3,126			138,599		4433.3%		4,376	143,078	3269.2%
2060	3		2,391			109,814		4593.3%		3,347	113,310	3385.6%
Past Future Lifetime	without interest	19,274,498	19,355,717			8,718,993	45.0%			19,355,717	8,718,993	45.0%
			13,893,746			59,422,242	427.7%			18,834,305	61,093,781	324.4%
			33,249,464			68,141,235	204.9%			38,190,022	69,812,774	182.8%
Past Future Lifetime	with interest at 4.5%	31,068,142	31,154,107			11,471,141	36.8%			31,154,107	11,471,141	36.8%
			10,067,135			32,541,981	323.2%			13,496,746	33,368,610	247.2%
			41,221,243			44,013,122	106.8%			44,650,853	44,839,752	100.4%
58/85 Test		original prem	35,084,896	58%	20,349,240	add'l prem	9,565,957	85%		8,131,063	sum	28,480,303

*Historical premium shown is collected premium, and projected premium shown is earned premium

As of 6/30/2021, the active life reserve held was \$27,712,732.

Catholic Order of Foresters

Exhibit D

Historical and Projected Experience

Nationwide Experience
FCNH, FCLTC, FCLTC 2000
(Reflects Claims Paid and Reserves Held As Of 6/30/2021)

Calendar Year	Life Years	Without Proposed Rate Increase					With Historical & Projected at Current (12-2020) PA rate level		
		Premium*		By Incurral Year	Incurred Loss Ratio		Premium*		Incurred Loss Ratio
		Actual	PA RateLvl	Inc Clms	Actual	PA RateLvl	At CRL	Inc Clms	At CRL
1998	7	26,884	26,884	0	0.0%	0.0%	52,696	0	0.0%
1999	65	116,684	116,684	0	0.0%	0.0%	228,713	0	0.0%
2000	169	280,636	280,636	0	0.0%	0.0%	550,078	0	0.0%
2001	368	520,048	520,048	0	0.0%	0.0%	1,019,353	0	0.0%
2002	595	829,398	829,398	0	0.0%	0.0%	1,625,713	0	0.0%
2003	831	1,043,188	1,043,188	80,505	7.7%	7.7%	2,044,766	80,505	3.9%
2004	915	1,074,557	1,074,557	0	0.0%	0.0%	2,106,252	0	0.0%
2005	902	1,065,845	1,065,845	160,108	15.0%	15.0%	2,089,176	160,108	7.7%
2006	886	1,025,325	1,025,325	116,868	11.4%	11.4%	2,009,753	116,868	5.8%
2007	870	1,010,652	1,010,652	86,000	8.5%	8.5%	1,980,991	86,000	4.3%
2008	857	993,656	993,656	144,354	14.5%	14.5%	1,947,676	144,354	7.4%
2009	845	955,914	955,914	180,601	18.9%	18.9%	1,873,698	180,601	9.6%
2010	832	955,064	955,064	391,460	41.0%	41.0%	1,872,032	391,460	20.9%
2011	819	953,319	953,319	624,313	65.5%	65.5%	1,868,611	624,313	33.4%
2012	810	922,435	922,435	352,945	38.3%	38.3%	1,808,075	352,945	19.5%
2013	799	903,082	903,082	697,668	77.3%	77.3%	1,770,143	697,668	39.4%
2014	788	892,958	892,958	727,702	81.5%	81.5%	1,750,297	727,702	41.6%
2015	775	874,661	874,661	1,617,677	184.9%	184.9%	1,714,434	1,617,677	94.4%
2016	757	833,611	833,611	948,638	113.8%	113.8%	1,633,971	948,638	58.1%
2017	731	934,225	946,184	536,402	57.4%	56.7%	1,572,090	536,402	34.1%
2018	701	970,571	983,608	658,675	67.9%	67.0%	1,461,720	658,675	45.1%
2019	673	1,022,083	1,021,791	584,550	57.2%	57.2%	1,407,532	584,550	41.5%
2020	643	1,069,701	1,126,218	810,528	75.8%	72.0%	1,299,122	810,528	62.4%
2021	615		1,205,119	1,250,194		103.7%	1,258,555	1,425,502	113.3%
2022	589		1,188,371	1,368,198		115.1%	1,188,372	1,550,013	130.4%
2023	563		1,118,632	1,504,423		134.5%	1,118,632	1,689,850	151.1%
2024	537		1,048,917	1,636,126		156.0%	1,048,917	1,823,903	173.9%
2025	509		982,280	1,778,057		181.0%	982,280	1,966,769	200.2%
2026	481		908,497	1,893,075		208.4%	908,497	2,081,375	229.1%
2027	453		838,883	2,006,850		239.2%	838,883	2,193,422	261.5%
2028	425		771,116	2,133,722		276.7%	771,116	2,317,322	300.5%
2029	397		704,838	2,240,588		317.9%	704,838	2,419,824	343.3%
2030	369		641,444	2,322,649		362.1%	641,444	2,496,462	389.2%
2031	342		580,538	2,399,065		413.2%	580,538	2,566,559	442.1%
2032	315		522,559	2,467,240		472.1%	522,559	2,627,673	502.8%
2033	289		467,735	2,533,453		541.6%	467,736	2,686,099	574.3%
2034	264		416,202	2,543,695		611.2%	416,202	2,687,915	645.8%
2035	239		368,298	2,541,805		690.1%	368,298	2,677,148	726.9%
2036	216		324,063	2,488,111		767.8%	324,063	2,614,357	806.7%
2037	194		283,426	2,443,976		862.3%	283,426	2,561,021	903.6%
2038	173		246,347	2,394,953		972.2%	246,347	2,502,691	1015.9%
2039	153		212,607	2,287,292		1075.8%	212,607	2,385,731	1122.1%
2040	135		182,245	2,182,985		1197.8%	182,245	2,272,250	1246.8%
2041	118		155,194	2,041,575		1315.5%	155,194	2,121,894	1367.3%
2042	103		131,348	1,891,376		1440.0%	131,348	1,963,133	1494.6%
2043	89		110,400	1,748,985		1584.2%	110,400	1,812,526	1641.8%
2044	76		92,208	1,579,237		1712.7%	92,209	1,635,012	1773.2%
2045	65		76,566	1,438,176		1878.4%	76,566	1,486,742	1941.8%
2046	55		63,206	1,286,712		2035.7%	63,206	1,328,619	2102.0%
2047	46		51,914	1,148,394		2212.1%	51,914	1,184,256	2281.2%
2048	39		42,391	1,003,463		2367.2%	42,391	1,033,876	2438.9%
2049	32		34,449	867,265		2517.5%	34,449	892,848	2591.8%
2050	27		27,853	756,191		2715.0%	27,853	777,525	2791.5%
2051	22		22,388	641,960		2867.5%	22,388	659,597	2946.2%
2052	18		17,892	548,135		3063.5%	17,892	562,591	3144.3%
2053	14		14,188	460,870		3248.4%	14,188	472,616	3331.2%
2054	12		11,176	382,228		3420.0%	11,176	391,693	3504.7%
2055	9		8,754	317,708		3629.4%	8,754	325,271	3715.7%
2056	7		6,819	258,441		3789.9%	6,819	264,432	3877.8%
2057	6		5,290	212,917		4024.9%	5,290	217,621	4113.8%
2058	5		4,076	173,738		4262.3%	4,076	177,396	4352.1%
2059	4		3,126	138,599		4433.3%	3,126	141,418	4523.5%
2060	3		2,391	109,814		4593.3%	2,391	111,966	4683.3%
Past Future Lifetime	without interest	19,274,498	19,355,717	8,718,993	45.2%	45.0%	35,686,892	8,718,993	24.4%
			13,893,746	59,422,242		427.7%	13,947,184	63,106,917	452.5%
			33,249,464	68,141,235		204.9%	49,634,076	71,825,911	144.7%
Past Future Lifetime	with interest at 4.5%	31,068,142	31,154,107	11,471,141	36.9%	36.8%	58,650,916	11,471,141	19.6%
			10,067,135	32,541,981		323.2%	10,119,409	34,902,309	344.9%
			41,221,243	44,013,122		106.8%	68,770,325	46,373,450	67.4%

*Historical premium shown is collected premium, and projected premium shown is earned premium

As of 6/30/2021, the active life reserve held was \$27,712,732.

Catholic Order of Foresters
Exhibit D
Historical and Projected Experience

Pennsylvania Experience
FCNH, FCLTC, FCLTC 2000
(Reflects Claims Paid and Reserves Held As Of 6/30/2021)

Calendar Year	Life Years	Historical Experience				
		By Incurral Year				Incurred Loss Ratio
		Premium*	Pd Clms	Clim Res	Inc Clms	
1998	0	0	0	0	0	
1999	1	1,670	0	0	0	0.0%
2000	4	8,086	0	0	0	0.0%
2001	5	8,015	0	0	0	0.0%
2002	5	9,676	0	0	0	0.0%
2003	11	20,065	0	0	0	0.0%
2004	12	18,123	0	0	0	0.0%
2005	12	19,252	0	0	0	0.0%
2006	11	18,876	0	0	0	0.0%
2007	11	15,480	0	0	0	0.0%
2008	11	15,480	0	0	0	0.0%
2009	11	15,480	0	0	0	0.0%
2010	11	15,480	0	0	0	0.0%
2011	11	15,480	0	0	0	0.0%
2012	11	15,480	0	0	0	0.0%
2013	11	15,480	0	0	0	0.0%
2014	11	15,480	0	0	0	0.0%
2015	11	15,480	0	0	0	0.0%
2016	10	12,051	0	0	0	0.0%
2017	10	16,475	0	0	0	0.0%
2018	10	17,113	0	0	0	0.0%
2019	9	15,526	30,405	0	30,405	195.8%
2020	8	17,538	0	0	0	0.0%

Projected Experience
We have not provided a Pennsylvania-specific projection due to the lack of credible experience.

*Historical premium shown is collected premium.

As of 6/30/2021, the active life reserve held was \$501,270.

Please note that only 1 claim has been incurred as of 6/30/2021 in Pennsylvania, so Pennsylvania-specific morbidity experience is non-credible.

AUTHORIZATION FOR FILING

Catholic Order of Foresters hereby authorizes UHAS to submit for approval, on behalf of Catholic Order of Foresters and under applicable insurance statutes, regulations, and rules, the Long Term Care rate and loss ratio filing described in the cover letter.



Signature

10/22/2019

Date

Nelson Lund

Printed Name

Actuarial Manager

Title



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TRIPLUS SERVICES, INC. • THIRD-PARTY ADMINISTRATOR
PO BOX 3735
OMAHA, NE 68103-0735

PHONE: (877) 702-7770
FAX: (855) 447-4719
EMAIL: CustomerSupport@TriPlusServices.com

<<MM/DD/YYYY>>

<<Name>>
<<Street Address>>
<<City, State, Zip>>

Policy No: <<Pol Num>>
Insured: <<Name>>

Dear <<Name>>:

We value your business and want to thank you for choosing Catholic Order of Foresters to provide your long term care coverage. We are committed to ensuring that your long term care insurance benefits are there when you need them.

The purpose of this letter is to notify you that we have determined that it is necessary to increase premiums for your coverage. This is not a premium notice; if you are on a direct, paper bill mode you will receive a notice of premium due approximately 30 days before the premium is due. Your future premium rate(s) will be as follows:

* The <<Modal>> renewal premium rate of \$<<####.##>> will become effective on <<MM/DD/YYYY>>. This represents a percentage increase of <<##.##>>%. Please note that this premium rate does not reflect any future rate increases that may occur.

Reasons for the Premium Increase

It is necessary to increase premiums due to greater-than-anticipated claims payments expected over the lifetime of all policies like yours. Premium rates must be adjusted to ensure current and future claims are adequately funded, so that long term care benefits will be available to you when you need them. Please be assured that you have not been singled out, and this premium increase is not a reflection of any previous claims history you may have had.

Options Available To You:

We do understand that this premium increase may make it more difficult to continue your current level of coverage. Please know that we do not take this action lightly and we recognize that raising premiums may have a significant impact on you. As such, below are options that you may consider at this time:

- 1. Continue current level of coverage:** Keep your exact coverage without any changes and the new premium will take effect on <<MM/DD/YYYY>>. If we do not hear from you, then we will assume that you have accepted the higher premium amount.

(Continued on reverse)

- 2. Adjust your coverage:** You may consider adjusting the level of coverage in order to make premiums more affordable. We have provided you with the attached Benefit Adjustment Option Return Form, which illustrates some of the policy adjustment offer(s) that are available as an alternative to the current plan, while still maintaining essential coverage. If you would like to investigate additional benefit adjustment options, not mentioned in the attached, please contact us at 877-702-7770.

Please discuss potential policy changes with your family or advisors as well as our Customer Support Department to make sure any changes to your policy will best suit your needs.

- 3. Elect the Contingent Benefit Upon Lapse:** If you determine that you would like to discontinue this coverage we will provide a Contingent Benefit Upon Lapse. The Contingent Benefit Upon Lapse is a pool of money that you can use to fund future long-term care expenses. If you elect this option, your policy will be paid-up with a maximum benefit equal to the sum of the premiums you have paid thus far. If you currently have an open claim, or if a new claim is filed, any benefits paid for dates of service after the effective date of the paid-up policy status will be applied to and will not exceed the policy's new maximum benefit amount. To determine the minimum number of days payable under the policy, the sum of all premiums paid is divided by the maximum Daily Benefit at the time of lapse. Benefit Eligibility is determined by the policy terms and all benefits paid by us will not exceed the maximum benefits which would have been payable if the policy had remained in premium paying status.

This Contingent Benefit Upon Lapse acts as a form of reduced paid up coverage and will be available should you choose to lapse the coverage at any point between now and 120 days following the date the new premium rates take effect. If you would like to elect this benefit please complete and return the enclosed Request to Exercise Contingent Benefit Upon Lapse form. If you do not complete this form, and you lapse your policy within 120 days after the effective date of the rate increase, this benefit will be automatically applied.

When you purchased your long-term care coverage, you made a conscious decision to protect yourself and your family from the increasing costs associated with long-term care, which can be significant; therefore we would like to stress the importance of retaining this valuable coverage. Before considering the options above, please carefully evaluate your situation and your reasons for initially purchasing this coverage.

In addition, you may also wish to contact the State Health Insurance Assistance Program (SHIP) located in your state if you need additional counseling on determining your response. Please go to www.shiptacenter.org to find the nearest SHIP to you.

This policy is guaranteed renewable. You have the right to renew your policy for life as long as you continue to pay your premium on time. The company has the right to change your premium if it does so for all policies of your class in your state.

We have enclosed additional information about this increase in the attached Frequently Asked Questions document. For any additional questions, please call our Policyholder Services Department at 877-702-7770, election option 3, then 1, at the prompt, and a customer support representative will be happy to assist you.

Sincerely,

TriPlus Services, Inc.

Third Party Administrator for Catholic Order of Foresters



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FAX: (855) 447-4719
EMAIL: CustomerSupport@TriPlusServices.com

FREQUENTLY ASKED QUESTIONS FOR INSURED

Q. Why is my premium increasing?

A: It is necessary to increase premiums due to greater than anticipated claims payments expected over the lifetime of all policies like this one. Many of the pricing assumptions that were common in the industry when your product was originally marketed have not developed as expected. The factors that contribute to the higher anticipated claims payments include morbidity, persistency and mortality. The claims experience trends have emerged higher than originally priced and more policyholders have kept their coverage inforce, resulting in more claims in the later policy durations. This premium increase will help ensure that the Company is able to live up to its obligations to you as a policyholder.

Q. When will my premium increase?

A: Premium for your inforce coverage will increase on the date specified in your letter. If your premium is paid through automatic bank draft, your new premium will be deducted automatically from your account on the stated date. If you pay your premium by check, you will receive a premium notice for the increased amount approximately 30 days before that premium due date.

Q. I thought my premium could never go up. Am I being singled out for this rate increase because of my age or health?

A: No. Your premium rates for long term care insurance will never change based on changes in your age or health. As stated in your policy, we can only change premium rates on a class basis, not an individual basis. This means that the rates have been changed on all policies like yours on a statewide class basis. Even though you may not have used your policy, we need to ensure that we can deliver on the promises of the policy should you need to make a claim in the future.

Q. Will my premium continue to increase?

A: The Company will continue to monitor emerging claims experience to ensure that it is able to deliver on the promises of your policy, primarily to pay any future claims you might incur.

Q. Have other insurance companies raised their long term care rates?

A: Yes. The deviations from expected claim and persistency assumptions that the Company has experienced have also been experienced by other long term care insurance carriers. Numerous other carriers have also implemented rate increases for long term care policies.

(continued on reverse)

Q. What are the options to reduce my coverage?

A: Please refer to the Benefit Adjustment Option Return Form for a description of some of the options available to you. If there are no specific options listed in your letter, or you would like to investigate additional options, please contact our Policyholder Services Department at 877-702-7770, pressing option 3, then 1, at the prompt.

Q. To keep my policy without paying the higher premium, how do I change my coverage?

A: To change your coverage we require your request in writing. You may submit the Benefit Adjustment Option Return Form included with your notification letter, or you may contact our Policyholder Services Department at 877-702-7770, election option 3, then 1, at the prompt, to obtain a proposed benefit adjustment form for those options not identified in your letter.

Q. How long do I have to make any coverage changes before the effective date of the increase?

A: You can change your coverage at any time, however in order for us to process any changes before the rate increase effective date you should submit your election to us 15 business days in advance of the effective date of the increase.

Q. I am currently receiving Long Term Care benefits. Do I have to remit the new premium?

A: The premium increase will not impact your current claim benefits. Your policy will continue to provide you with the benefits in accordance with the terms of the coverage you purchased. If your policy contains a provision that waives premium and you are currently receiving that benefit, the new premium will also be waived until such time as you are no longer eligible for waiver of premium, as stated in your policy. You will have to pay the increased premium only after you return to a premium paying status. If your policy does not have a waiver of premium provision or if you do not qualify under this provision, then the premium increase will impact you, even if you are on claim. Please refer to the "Options Available To You" section of the rate increase notification letter.

Q. What safety measures are in place should COF become financially distressed?

A: The premium increases are designed to prevent this from happening. Also, COF, like all other fraternal insurers, may assess its members (in this case, all COF policyholders), a Maintenance of Reserve fee, should the need ever arise.

Q. Whom should I contact if I have additional questions about this rate increase?

A: If you have additional questions, please contact our Policyholder Services Department at 877-702-7770, election option 3, then 1, at the prompt. The office hours are Monday through Friday 7:30 a.m. to 4:45 p.m. Central time.



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BENEFIT ADJUSTMENT OPTION RETURN FORM

Date: <<MM/DD/YYYY>>

Policyholder: <<Name>>

Policy Number: <<Pol Num>>

If you would like to implement one of the benefit adjustment options listed in this letter please circle the option you would like to exercise and then sign, date, and return this page using the enclosed envelope. While you are able to adjust your benefits at any time, to ensure that your option is effective before the rate increase effective date, please return your option to us within 45 days from the date of this letter.

If you would like to investigate additional benefit adjustment offers, not mentioned below, please call our dedicated Customer Support Department, toll free at 877-702-7770.

If you do not wish to implement any of these options you do not need to return this form to us.

* Reduce your policy maximum Benefit Period from <<Lifetime>> to <<5 Years>> and reduce your base Daily Benefit Amount from \$<<###.##>> to \$<<###.##>> for a new <<Modal>> premium of \$<<###.##>>. Since you have an active Simple Inflation rider, your new inflated Daily Benefit Amount would be \$<<###.##>> as of <<MM/DD/YYYY>> and is subject to further increases per rider terms.

* Reduce your policy maximum Benefit Period from <<Lifetime>> to <<5 Years>> for a new <<Modal>> premium of \$<<###.##>>

* Increase your Elimination Period from <<20 Days>> to <<90 Days>> for a new <<Modal>> premium of \$<<###.##>>

* Remove your Return of Premium Rider for a new <<Modal>> premium of \$<<####.##>>

Please be aware when considering these options, that if you choose to reduce the maximum available under your policy, then any prior claims made on your policy will affect the benefits available after the reduction.

By signing and returning this page, Catholic Order of Foresters will change the policy's available benefits, effective <<MM/DD/YYYY>>, to the choice you selected above. You will receive an updated benefit rider once this change to the policy has been made. Please note that the above premium rates are for the current rate increase period and do not reflect any additional rate increases that may be scheduled to occur, or may occur in the future, whether mentioned in this letter or not.

Signature _____ Date _____

If anyone other than the policyholder signs above, we must have copies of Durable Financial Power of Attorney papers or other legal representative papers on file.



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FAX: (855) 447-4719

EMAIL: CustomerSupport@TriPlusServices.com

REQUEST TO EXERCISE CONTINGENT BENEFIT UPON LAPSE

Date: <<MM/DD/YYYY>>

Policyholder: <<Name>>

Policy Number: <<Pol Num>>

NOTE: This benefit can be elected by either lapsing your coverage by means of not paying your premium, or by completing and returning this form to us. Either way your election for this coverage must be made within 120 days following the effective date of this rate increase. ***If you do not want to exercise the Contingent Benefit Upon Lapse, then you do not need to complete this form.***

By completing and returning this form, I am electing to stop paying premiums for my long term care coverage and I am exercising the Contingent Benefit Upon Lapse option available with this rate increase.

By exercising this option, I understand that:

- My new maximum benefit amount under this policy will be equal to the sum of the premiums paid into the policy from the issue date through the current paid to date or the remaining amount of benefits available under the policy; whichever is less; and,
- Once I exercise this option, I will only be able to reinstate my original maximum benefit amount if I submit a premium payment within 65 days from my premium due date; and,
- I must meet the eligibility requirements required under the Policy in order to receive benefit payments.

By signing below I agree to elect the Contingent Benefit Upon Lapse and I agree to all of the above.

Signature _____ Date _____

If anyone other than the policyholder signs above, we must have copies of Durable Financial Power of Attorney papers or other legal representative papers on file.

State:	Pennsylvania	Filing Company:	Catholic Order of Foresters
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
Product Name:	FCNH, FCLTC, FCLTC 2000		
Project Name/Number:	COF LTC Rate Inc 2021 - Gens 1 and 2/		

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date	Schedule Item Status	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
08/30/2021		Rate	Premium Rate Sheets	09/28/2021	Rates FCNH PA-2021.pdf (Superceded) Rates FCLTC PA-2021.pdf (Superceded) Rates FCLTC 2000 PA-2021.pdf (Superceded)

Catholic Order of Foresters
Nursing Home Only Policy - Form FCNH, \$10/Day Annual Premiums
Standard Rates - Before Spouse & Preferred Risk Discount

Issue Age	<u>730-Day Benefit Period</u> Elimination Period			<u>1095-Day Benefit Period</u> Elimination Period			<u>1825-Day Benefit Period</u> Elimination Period			<u>Lifetime Benefit Period</u> Elimination Period		
	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>
18-44	31.56	30.18	29.40	33.90	32.54	31.56	36.84	35.28	34.30	46.64	44.50	42.92
45-49	38.02	36.26	35.08	41.74	39.60	38.22	46.26	43.90	42.34	59.98	56.64	54.48
50	43.90	41.74	40.18	48.80	46.26	44.50	54.88	51.94	49.98	71.94	67.82	65.08
51	46.06	43.52	41.94	51.16	48.42	46.64	57.82	54.48	52.52	76.05	71.54	68.60
52	48.02	45.28	43.52	53.50	50.56	48.60	60.56	57.24	54.88	79.97	75.26	72.13
53	50.76	47.82	46.06	57.04	53.70	51.54	64.68	60.96	58.60	85.66	80.56	77.03
54	53.50	50.38	48.42	60.37	56.84	54.48	69.00	64.88	62.14	91.54	85.85	82.12
55	56.44	53.12	50.76	63.90	59.98	57.42	73.11	68.80	65.86	97.22	91.14	87.02
56	59.20	55.66	53.32	67.23	63.12	60.37	77.22	72.52	69.38	102.90	96.44	92.12
57	61.94	58.22	55.66	70.76	66.25	63.50	81.34	76.44	73.11	108.58	101.72	97.02
58	67.62	63.31	60.56	77.42	72.52	69.38	89.58	83.89	80.16	120.94	113.10	107.80
59	73.11	68.40	65.27	84.28	78.80	75.26	97.61	91.54	87.22	133.28	124.66	118.78
60	78.80	73.50	70.17	90.94	85.06	81.14	105.84	98.98	94.48	145.63	136.03	129.56
61	84.28	78.60	75.07	97.80	91.34	87.02	113.88	106.43	101.53	158.18	147.59	140.34
62	89.96	83.89	79.78	104.47	97.42	92.90	122.11	114.08	108.58	170.52	158.96	151.12
63	101.34	94.28	89.58	118.39	110.35	104.86	138.77	129.56	123.29	187.77	174.84	166.21
64	112.70	104.66	99.57	132.30	123.09	117.02	155.43	144.85	137.79	205.02	190.91	181.11
65	124.07	115.25	109.37	146.02	135.83	128.97	172.09	160.33	152.30	222.27	206.79	196.20
66	135.44	125.64	119.17	159.94	148.57	141.12	188.75	175.62	166.80	239.52	222.66	211.29
67	146.81	136.03	128.97	173.86	161.31	153.08	205.41	191.11	181.50	256.77	238.73	226.19
68	162.29	150.34	142.50	192.67	178.76	169.54	228.15	212.08	201.30	287.73	267.35	253.43
69	177.58	164.45	155.82	211.49	196.20	186.01	250.69	233.05	221.09	318.91	295.97	280.49
70	193.07	178.76	169.35	230.11	213.45	202.28	273.23	253.83	240.89	349.87	324.79	307.53
71	208.55	193.07	182.68	248.93	230.89	218.74	295.77	274.80	260.49	380.83	353.39	334.77
72	223.84	207.18	196.20	267.75	248.34	235.21	318.51	295.77	280.29	411.81	382.21	361.83
73	251.87	233.05	220.70	302.05	280.09	265.19	359.67	333.99	316.55	457.87	424.75	402.01
74	279.89	258.93	245.01	336.35	311.65	295.19	400.83	372.21	352.61	503.73	467.28	442.19
75	307.93	284.79	269.51	370.65	343.41	325.17	442.19	410.43	388.87	549.60	509.81	482.37
76	335.95	310.87	294.01	404.75	375.15	355.17	483.35	448.65	424.94	595.66	552.34	522.55
77	363.99	336.73	318.51	439.05	406.91	385.15	524.51	486.88	461.20	641.52	594.88	562.73
78	408.87	377.89	357.31	494.13	457.87	433.17	590.96	548.23	519.22	711.70	659.56	623.88
79	453.55	419.06	396.33	549.21	508.63	481.19	657.60	609.78	577.43	782.06	724.44	685.04
80	498.25	460.22	435.13	604.28	559.40	529.22	724.04	671.32	635.45	852.23	789.32	746.20
81	543.13	501.58	473.94	659.36	610.36	577.24	790.49	732.86	693.66	922.40	854.19	807.34
82	587.82	542.74	512.95	714.44	661.12	625.46	856.94	794.22	751.68	992.77	918.87	868.50
83	629.18	580.57	548.23	764.62	707.18	668.58	916.91	849.29	803.42	1,060.19	980.81	926.52
84	670.54	618.40	583.70	814.99	753.24	711.90	976.69	904.17	855.17	1,127.81	1,042.95	984.73
85+	876.54	804.40	756.58	1,058.43	973.95	917.31	1,261.69	1,163.69	1,097.63	1,452.60	1,338.32	1,260.51

Catholic Order of Foresters
Nursing Home Only Policy - Form FCNH, \$10/Day Annual Premiums
Standard Rates - Before Spouse & Preferred Risk Discount

Issue Age	<u>730-Day Benefit Period</u> Elimination Period			<u>1095-Day Benefit Period</u> Elimination Period			<u>1825-Day Benefit Period</u> Elimination Period			<u>Lifetime Benefit Period</u> Elimination Period		
	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>
18-44	44.18	42.25	41.16	47.46	45.55	44.18	51.57	49.39	48.02	65.29	62.30	60.08
45-49	53.22	50.76	49.11	58.43	55.44	53.50	64.76	61.46	59.27	83.97	79.29	76.27
50	61.46	58.43	56.25	68.32	64.76	62.30	76.83	72.71	69.97	100.71	94.94	91.11
51	64.48	60.92	58.71	71.62	67.78	65.29	80.94	76.27	73.52	106.46	100.15	96.03
52	67.22	63.39	60.92	74.89	70.78	68.04	84.78	80.13	76.83	111.95	105.36	100.97
53	71.06	66.94	64.48	79.85	75.17	72.15	90.55	85.34	82.03	119.92	112.78	107.83
54	74.89	70.53	67.78	84.51	79.57	76.27	96.59	90.83	86.99	128.15	120.18	114.96
55	79.01	74.36	71.06	89.45	83.97	80.38	102.35	96.31	92.20	136.10	127.59	121.82
56	82.87	77.92	74.64	94.12	88.36	84.51	108.10	101.52	97.13	144.05	135.01	128.96
57	86.71	81.50	77.92	99.06	92.74	88.89	113.87	107.01	102.35	152.00	142.40	135.82
58	94.66	88.63	84.78	108.38	101.52	97.13	125.40	117.44	112.22	169.30	158.33	150.91
59	102.35	95.75	91.37	117.98	110.31	105.36	136.64	128.15	122.10	186.58	174.51	166.28
60	110.31	102.89	98.23	127.31	119.08	113.59	148.17	138.56	132.26	203.87	190.43	181.37
61	117.98	110.03	105.09	136.91	127.87	121.82	159.42	148.99	142.13	221.44	206.61	196.46
62	125.94	117.44	111.68	146.25	136.38	130.05	170.94	159.70	152.00	238.71	222.53	211.55
63	141.87	131.98	125.40	165.73	154.48	146.79	194.26	181.37	172.59	262.86	244.76	232.68
64	157.77	146.51	139.39	185.21	172.31	163.82	217.59	202.78	192.89	287.01	267.25	253.54
65	173.69	161.34	153.11	204.41	190.15	180.55	240.91	224.45	213.20	311.16	289.49	274.66
66	189.60	175.88	166.83	223.90	207.98	197.55	264.23	245.85	233.50	335.30	311.70	295.78
67	205.52	190.43	180.55	243.39	225.82	214.30	287.55	267.53	254.08	359.45	334.20	316.64
68	227.19	210.46	199.49	269.72	250.25	237.34	319.39	296.89	281.80	402.79	374.26	354.78
69	248.59	230.21	218.13	296.06	274.66	260.40	350.94	326.25	309.50	446.44	414.33	392.66
70	270.28	250.25	237.07	322.13	298.81	283.17	382.49	355.34	337.22	489.78	454.67	430.51
71	291.95	270.28	255.73	348.48	323.22	306.21	414.05	384.69	364.66	533.12	494.71	468.64
72	313.35	290.03	274.66	374.82	347.65	329.27	445.88	414.05	392.38	576.49	535.06	506.53
73	352.59	326.25	308.96	422.84	392.10	371.24	503.50	467.55	443.14	640.97	594.61	562.77
74	391.82	362.48	342.99	470.86	436.28	413.24	561.12	521.06	493.62	705.17	654.15	619.02
75	431.07	398.68	377.29	518.87	480.74	455.21	619.02	574.56	544.38	769.39	713.68	675.27
76	470.30	435.19	411.58	566.61	525.17	497.20	676.64	628.07	594.87	833.86	773.22	731.52
77	509.55	471.39	445.88	614.63	569.63	539.17	734.26	681.58	645.63	898.06	832.77	787.77
78	572.38	529.01	500.20	691.73	640.97	606.39	827.28	767.47	726.86	996.31	923.32	873.37
79	634.92	586.64	554.82	768.84	712.03	673.62	920.57	853.63	808.34	1,094.81	1,014.14	958.99
80	697.50	644.26	609.14	845.93	783.10	740.86	1,013.58	939.78	889.57	1,193.04	1,104.97	1,044.61
81	760.33	702.16	663.47	923.04	854.44	808.08	1,106.61	1,025.93	971.05	1,291.27	1,195.78	1,130.20
82	822.89	759.78	718.08	1,000.14	925.50	875.58	1,199.63	1,111.83	1,052.28	1,389.78	1,286.33	1,215.81
83	880.79	812.74	767.47	1,070.39	989.98	935.95	1,283.58	1,188.92	1,124.71	1,484.16	1,373.04	1,297.04
84	938.69	865.70	817.12	1,140.90	1,054.46	996.59	1,367.27	1,265.75	1,197.15	1,578.82	1,460.03	1,378.52
85+	1,227.07	1,126.08	1,059.14	1,481.70	1,363.43	1,284.14	1,766.24	1,629.05	1,536.57	2,033.49	1,873.51	1,764.59

Catholic Order of Foresters
Optional Rider Factors

<u>Issue Age</u>	<u>Rider FCIPR Inflation Protection</u>	<u>Rider FCNFB Non-Forfeiture Benefit</u>
18-44	2.49	1.25
45-49	2.44	1.20
50	2.38	1.15
51	2.35	1.14
52	2.33	1.14
53	2.30	1.14
54	2.28	1.14
55	2.25	1.14
56	2.23	1.14
57	2.20	1.14
58	2.17	1.14
59	2.13	1.14
60	2.10	1.14
61	2.06	1.14
62	2.03	1.13
63	2.00	1.13
64	1.97	1.13
65	1.94	1.13
66	1.91	1.12
67	1.88	1.12
68	1.85	1.12
69	1.81	1.12
70	1.77	1.11
71	1.73	1.11
72	1.69	1.11
73	1.66	1.10
74	1.63	1.10
75	1.60	1.09
76	1.58	1.09
77	1.55	1.08
78	1.52	1.08
79	1.50	1.07
80	1.47	1.07
81	1.45	1.07
82	1.42	1.06
83	1.41	1.06
84	1.39	1.06
85+	1.33	1.06

Premium Calculation Example:

Annual Base Premium

x

Inflation Protection Factor
(if chosen by Insured)

x

Non-Forfeiture Benefit Factor
(if chosen by Insured)

=

Total Gross Premium

Spouse Discount

10%

Preferred Risk Discount

10%

Modal Factors

Semi-Annual: 0.52

Quarterly: 0.265

Monthly PAC: 0.0875

Catholic Order of Foresters
Base Plan (Form FCLTC-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	21.56	24.41	28.22	35.77
45-49	46.74	54.26	64.32	83.68
50	53.41	62.51	74.65	97.80
51	55.21	64.78	77.50	101.81
52	57.03	67.04	80.36	105.77
53	58.83	69.30	83.23	109.77
54	60.65	71.55	86.11	113.76
55	62.44	73.83	88.97	117.77
56	66.93	79.38	95.88	127.29
57	71.45	84.96	102.81	136.81
58	75.94	90.49	109.75	146.32
59	80.44	96.05	116.65	155.84
60	84.94	101.62	123.58	165.36
61	92.89	111.54	136.06	182.68
62	100.85	121.50	148.54	199.95
63	108.79	131.41	161.02	217.27
64	116.75	141.33	173.48	234.55
65	124.73	151.29	185.98	251.87
66	138.11	167.91	206.79	276.85
67	151.53	184.57	227.58	301.83
68	164.94	201.21	248.41	326.82
69	178.35	217.87	269.20	351.76
70	191.76	234.52	290.01	376.74
71	218.17	267.36	331.12	422.37
72	244.60	300.22	372.20	467.98
73	271.00	333.08	413.29	513.60
74	297.44	365.92	454.37	559.22
75	323.88	398.78	495.49	604.84
76	349.40	430.30	534.59	652.68
77	374.98	461.80	573.69	700.50
78	400.55	493.33	612.79	748.32
79	426.11	524.83	651.88	796.14
80	451.68	556.36	690.99	843.97
81	487.16	600.38	745.93	911.34
82	522.63	644.39	800.89	978.76
83	558.10	688.45	855.87	1046.16
84	593.57	732.45	910.84	1113.53
85+	723.39	892.93	1110.66	1358.10

Catholic Order of Foresters
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	3.42	4.01	4.99	6.07
45-49	8.81	10.31	12.90	16.05
50	10.42	12.25	15.28	19.13
51	10.76	12.61	15.75	19.72
52	11.05	12.95	16.18	20.29
53	11.35	13.32	16.64	20.87
54	11.64	13.70	17.07	21.44
55	11.96	14.02	17.52	22.03
56	12.65	14.83	18.53	23.30
57	13.35	15.66	19.53	24.57
58	14.02	16.46	20.56	25.85
59	14.72	17.27	21.56	27.14
60	15.41	18.06	22.55	28.41
61	16.39	19.20	23.99	30.18
62	17.37	20.36	25.39	31.97
63	18.40	21.47	26.79	33.74
64	19.38	22.61	28.21	35.55
65	20.36	23.73	29.61	37.32
66	21.75	25.32	31.58	41.07
67	23.12	26.93	33.59	44.81
68	24.50	28.51	35.56	48.58
69	25.89	30.10	37.53	52.34
70	27.28	31.69	39.50	56.07
71	33.19	38.73	48.32	64.40
72	39.08	45.79	57.14	72.74
73	44.96	52.84	65.97	81.07
74	50.87	59.90	74.79	89.45
75	56.76	66.95	83.61	97.78
76	59.81	70.55	88.11	103.00
77	62.89	74.16	92.60	108.22
78	65.93	77.73	97.10	113.47
79	68.98	81.34	101.60	118.70
80	72.03	84.94	106.06	123.95
81	77.03	90.82	113.41	132.50
82	82.03	96.70	120.77	141.10
83	87.04	102.60	128.10	149.65
84	92.04	108.48	135.45	158.25
85+	111.61	131.51	164.24	191.82

Catholic Order of Foresters
5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	21.97	25.98	31.00	40.89
45-49	43.10	52.36	64.17	87.02
50	47.73	58.50	72.22	98.77
51	48.21	59.22	73.32	100.57
52	48.59	59.90	74.30	102.19
53	48.91	60.46	75.17	103.61
54	49.16	60.93	75.88	104.87
55	49.33	61.28	76.52	105.97
56	51.67	64.31	80.36	111.51
57	53.88	67.12	83.89	116.55
58	55.87	69.68	87.13	121.15
59	57.74	72.03	90.07	125.32
60	59.46	74.18	92.69	128.99
61	63.52	79.41	99.59	139.93
62	67.35	84.29	106.05	150.36
63	70.94	88.82	112.08	160.35
64	74.27	93.01	117.62	169.82
65	77.33	96.82	122.73	178.84
66	82.04	102.77	130.26	186.02
67	86.06	107.79	136.55	191.37
68	89.39	111.89	141.59	194.76
69	92.03	115.04	145.37	196.29
70	93.97	117.28	147.90	195.91
71	102.54	127.80	161.59	209.50
72	110.07	136.91	173.45	220.88
73	116.54	144.55	183.49	230.10
74	121.94	150.76	191.76	237.10
75	126.31	155.53	198.19	241.94
76	128.50	158.25	201.87	246.45
77	129.56	159.56	203.76	248.81
78	129.48	159.48	203.93	249.04
79	128.29	157.99	202.35	247.13
80	125.93	155.12	199.02	243.06
81	123.97	152.80	196.58	240.18
82	120.32	148.35	191.47	233.96
83	114.93	141.74	183.66	224.50
84	107.80	133.02	173.16	211.70
85+	88.69	109.47	145.13	177.47

Catholic Order of Foresters
5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	28.89	33.62	40.76	52.92
45-49	59.99	71.27	88.23	117.62
50	67.46	80.63	100.38	134.77
51	68.30	81.75	101.99	137.22
52	69.02	82.80	103.46	139.46
53	69.68	83.70	104.77	141.52
54	70.26	84.50	105.94	143.36
55	70.75	85.19	106.99	145.02
56	74.09	89.47	112.34	152.18
57	77.26	93.51	117.42	158.83
58	80.27	97.31	122.18	164.95
59	83.08	100.87	126.61	170.55
60	85.67	104.24	130.71	175.65
61	91.15	111.24	139.53	186.00
62	96.37	117.90	147.82	195.25
63	101.30	124.20	155.63	203.44
64	105.94	130.15	162.95	210.58
65	110.28	135.75	169.74	216.60
66	116.69	143.59	179.86	234.36
67	122.32	150.43	188.73	251.40
68	127.19	156.23	196.29	267.77
69	131.30	161.03	202.56	283.45
70	134.63	164.81	207.57	298.44
71	151.32	185.06	233.52	321.44
72	166.72	203.58	257.25	340.96
73	180.84	220.34	278.79	357.02
74	193.67	235.34	298.12	369.66
75	205.20	248.60	315.27	378.79
76	210.31	254.74	323.22	388.36
77	214.15	259.33	329.28	395.51
78	216.71	262.36	333.34	400.26
79	218.03	263.83	335.46	402.67
80	218.04	263.72	335.65	402.70
81	220.62	266.73	339.88	407.60
82	221.22	267.33	341.12	408.79
83	219.89	265.46	339.28	406.24
84	216.56	261.18	334.39	400.01
85+	213.95	257.09	330.83	394.34

Catholic Order of Foresters
Base Plan (Form FCLTC-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	30.18	34.17	39.51	50.07
45-49	65.43	75.96	90.04	117.14
50	74.77	87.51	104.50	136.91
51	77.29	90.69	108.49	142.52
52	79.84	93.85	112.50	148.07
53	82.36	97.01	116.51	153.67
54	84.90	100.16	120.55	159.25
55	87.41	103.35	124.55	164.87
56	93.70	111.12	134.22	178.19
57	100.02	118.94	143.92	191.52
58	106.31	126.68	153.64	204.83
59	112.61	134.46	163.30	218.16
60	118.91	142.26	173.00	231.49
61	130.04	156.14	190.47	255.73
62	141.18	170.09	207.94	279.91
63	152.30	183.96	225.41	304.16
64	163.44	197.85	242.85	328.35
65	174.61	211.79	260.35	352.59
66	193.34	235.06	289.49	387.56
67	212.13	258.38	318.59	422.53
68	230.90	281.67	347.75	457.52
69	249.67	305.00	376.85	492.43
70	268.44	328.30	405.98	527.40
71	305.42	374.28	463.53	591.28
72	342.42	420.28	521.04	655.13
73	379.37	466.28	578.56	718.99
74	416.39	512.25	636.07	782.85
75	453.40	558.25	693.64	846.72
76	489.13	602.38	748.37	913.69
77	524.93	646.47	803.11	980.63
78	560.73	690.61	857.84	1047.57
79	596.51	734.71	912.57	1114.52
80	632.31	778.85	967.32	1181.47
81	681.98	840.47	1044.23	1275.78
82	731.63	902.08	1121.17	1370.17
83	781.28	963.76	1198.13	1464.52
84	830.94	1025.36	1275.08	1558.83
85+	1012.67	1250.01	1554.81	1901.20

Catholic Order of Foresters
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	4.79	5.61	6.99	8.50
45-49	12.33	14.43	18.06	22.47
50	14.59	17.15	21.39	26.78
51	15.06	17.65	22.05	27.61
52	15.47	18.13	22.65	28.40
53	15.89	18.65	23.29	29.22
54	16.29	19.18	23.90	30.01
55	16.74	19.63	24.53	30.84
56	17.71	20.76	25.94	32.62
57	18.69	21.92	27.34	34.40
58	19.63	23.04	28.78	36.19
59	20.61	24.18	30.18	37.99
60	21.57	25.28	31.57	39.77
61	22.94	26.88	33.58	42.25
62	24.32	28.50	35.54	44.75
63	25.76	30.06	37.50	47.23
64	27.13	31.65	39.49	49.77
65	28.50	33.22	41.45	52.24
66	30.45	35.45	44.21	57.49
67	32.37	37.70	47.02	62.73
68	34.30	39.91	49.78	68.01
69	36.24	42.14	52.54	73.27
70	38.19	44.36	55.30	78.49
71	46.46	54.22	67.64	90.15
72	54.71	64.10	79.99	101.83
73	62.94	73.97	92.35	113.49
74	71.21	83.85	104.70	125.22
75	79.46	93.72	117.05	136.88
76	83.73	98.76	123.35	144.19
77	88.04	103.82	129.63	151.50
78	92.30	108.81	135.93	158.85
79	96.57	113.87	142.23	166.17
80	100.83	118.91	148.47	173.52
81	107.83	127.14	158.76	185.49
82	114.83	135.37	169.07	197.53
83	121.85	143.63	179.33	209.50
84	128.85	151.86	189.62	221.53
85+	156.24	184.10	229.92	268.53

Catholic Order of Foresters
5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	30.76	36.37	43.40	57.24
45-49	60.34	73.30	89.83	121.82
50	66.82	81.89	101.10	138.27
51	67.49	82.90	102.64	140.79
52	68.02	83.85	104.01	143.06
53	68.47	84.64	105.23	145.04
54	68.82	85.30	106.22	146.81
55	69.06	85.79	107.12	148.35
56	72.33	90.03	112.50	156.10
57	75.43	93.96	117.44	163.16
58	78.21	97.55	121.97	169.60
59	80.83	100.83	126.09	175.44
60	83.24	103.84	129.76	180.57
61	88.92	111.17	139.42	195.89
62	94.28	118.00	148.46	210.49
63	99.31	124.34	156.90	224.47
64	103.97	130.20	164.66	237.73
65	108.25	135.54	171.81	250.36
66	114.85	143.87	182.35	260.41
67	120.48	150.90	191.16	267.90
68	125.14	156.63	198.21	272.64
69	128.83	161.04	203.50	274.79
70	131.55	164.18	207.05	274.25
71	143.55	178.91	226.21	293.28
72	154.09	191.66	242.81	309.21
73	163.14	202.36	256.87	322.12
74	170.70	211.05	268.44	331.92
75	176.82	217.73	277.45	338.69
76	179.89	221.53	282.60	345.01
77	181.37	223.37	285.24	348.31
78	181.26	223.26	285.48	348.63
79	179.59	221.17	283.27	345.96
80	176.29	217.15	278.61	340.26
81	173.55	213.90	275.19	336.23
82	168.44	207.68	268.04	327.52
83	160.89	198.42	257.11	314.28
84	150.91	186.21	242.41	296.36
85+	124.16	153.25	203.17	248.44

Catholic Order of Foresters
5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	40.44	47.06	57.06	74.08
45-49	83.98	99.77	123.51	164.66
50	94.44	112.87	140.52	188.66
51	95.61	114.44	142.78	192.09
52	96.62	115.91	144.83	195.23
53	97.55	117.17	146.67	198.11
54	98.36	118.29	148.31	200.69
55	99.04	119.26	149.78	203.01
56	103.72	125.25	157.26	213.04
57	108.16	130.90	164.38	222.35
58	112.37	136.22	171.04	230.91
59	116.30	141.21	177.24	238.75
60	119.93	145.93	182.98	245.89
61	127.60	155.72	195.33	260.38
62	134.91	165.05	206.93	273.33
63	141.81	173.87	217.87	284.80
64	148.31	182.20	228.11	294.79
65	154.38	190.04	237.62	303.22
66	163.35	201.01	251.79	328.08
67	171.24	210.59	264.20	351.93
68	178.05	218.71	274.79	374.85
69	183.81	225.43	283.56	396.80
70	188.47	230.72	290.58	417.79
71	211.83	259.07	326.90	449.98
72	233.39	284.99	360.12	477.31
73	253.16	308.45	390.28	499.79
74	271.12	329.45	417.34	517.49
75	287.26	348.02	441.35	530.27
76	294.41	356.61	452.48	543.67
77	299.79	363.04	460.96	553.67
78	303.37	367.28	466.64	560.32
79	305.22	369.34	469.61	563.70
80	305.23	369.18	469.88	563.74
81	308.85	373.40	475.80	570.60
82	309.69	374.24	477.53	572.27
83	307.82	371.62	474.96	568.70
84	303.16	365.63	468.11	559.97
85+	299.51	359.90	463.13	552.04

Catholic Order of Foresters
Premium Adjustment Factors
Attributable to Increasing Elimination Periods

Days in Elimination Period		
20	60	90
1.15	1.07	1.00

Catholic Order of Foresters
Nonforfeiture Benefit Rider (FCNFBR-PA)
Factors to Apply to Total Premium
(Premium for Base Policy and Any Other Riders)

Issue Age	Factor
18-44	25%
45-49	19%
50-55	17%
56-60	16%
61-65	15%
66-70	14%
71-75	13%
76-80	12%
>=81	11%

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	29.81	34.51	40.83	54.17
45-49	42.61	49.30	58.31	77.35
50	53.99	63.38	75.88	102.48
51	56.23	66.15	79.38	107.50
52	58.48	68.93	82.88	112.50
53	60.74	71.74	86.37	117.53
54	62.94	74.51	89.87	122.57
55	65.18	77.31	93.37	127.59
56	69.37	82.49	99.85	136.90
57	73.53	87.69	106.33	146.21
58	77.71	92.83	112.82	155.52
59	81.90	98.03	119.30	164.83
60	86.06	103.21	125.81	174.14
61	94.16	113.31	138.48	192.45
62	102.25	123.40	151.19	210.73
63	110.33	133.51	163.86	229.06
64	118.42	143.60	176.57	247.38
65	126.52	153.70	189.24	265.68
66	141.64	172.58	212.93	292.70
67	156.79	191.43	236.60	319.70
68	171.90	210.31	260.27	346.71
69	187.02	229.16	283.93	373.69
70	202.17	248.04	307.61	400.71
71	229.82	282.46	350.72	445.40
72	257.46	316.91	393.84	490.03
73	285.11	351.33	436.93	534.70
74	312.75	385.76	480.05	579.36
75	340.40	420.16	523.15	624.01
76	366.06	451.92	562.63	671.20
77	391.74	483.66	602.11	718.37
78	417.41	515.41	641.59	765.59
79	443.09	547.15	681.05	812.75
80	468.76	578.90	720.53	859.95
81	503.54	622.13	774.60	924.73
82	538.32	665.36	828.64	989.50
83	573.09	708.58	882.70	1054.30
84	607.84	751.81	936.74	1119.08
85+	642.62	795.07	990.81	1183.86

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	35.40	41.08	49.00	68.02
45-49	50.56	58.69	70.00	97.15
50	64.76	76.03	91.70	129.34
51	67.40	79.27	95.75	135.41
52	70.00	82.51	99.80	141.45
53	72.65	85.75	103.87	147.52
54	75.28	88.98	107.92	153.58
55	77.91	92.22	111.99	159.66
56	82.72	98.13	119.38	170.71
57	87.51	104.05	126.79	181.73
58	92.33	109.96	134.18	192.79
59	97.14	115.85	141.59	203.83
60	101.93	121.79	148.98	214.85
61	111.02	133.02	163.09	236.07
62	120.12	144.27	177.20	257.26
63	129.18	155.52	191.33	278.46
64	138.28	166.77	205.44	299.67
65	147.37	178.00	219.55	320.87
66	164.17	198.83	245.66	351.53
67	181.00	219.64	271.75	382.20
68	197.80	240.43	297.85	412.86
69	214.63	261.26	323.92	443.53
70	231.45	282.06	350.03	474.17
71	265.32	323.97	402.46	524.50
72	299.20	365.84	454.90	574.80
73	333.09	407.70	507.35	625.14
74	366.95	449.61	559.78	675.45
75	400.84	491.48	612.21	725.78
76	429.58	526.85	656.20	778.07
77	458.35	562.17	700.16	830.41
78	487.07	597.54	744.17	882.73
79	515.82	632.89	788.15	935.06
80	544.57	668.25	832.14	987.38
81	584.23	717.26	893.41	1060.39
82	623.92	766.27	954.68	1133.39
83	663.60	815.29	1015.93	1206.40
84	703.29	864.29	1077.21	1279.40
85+	742.95	913.30	1138.49	1352.42

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	52.83	63.40	77.13	104.58
45-49	75.46	90.56	110.18	149.43
50	91.47	110.58	135.27	184.44
51	94.98	114.97	140.82	192.20
52	98.48	119.37	146.33	199.95
53	101.99	123.78	151.83	207.70
54	105.47	128.17	157.38	215.48
55	108.98	132.57	162.89	223.24
56	114.59	139.58	171.73	235.60
57	120.24	146.64	180.55	247.96
58	125.84	153.68	189.41	260.36
59	131.45	160.74	198.23	272.73
60	137.09	167.78	207.07	285.09
61	148.36	181.92	224.89	310.11
62	159.63	196.10	242.69	335.16
63	170.90	210.24	260.49	360.17
64	182.17	224.43	278.32	385.22
65	193.44	238.57	296.13	410.24
66	211.69	261.48	324.89	440.43
67	229.93	284.42	353.70	470.60
68	248.16	307.33	382.48	500.78
69	266.40	330.27	411.25	530.95
70	284.67	353.18	440.03	561.14
71	314.08	390.12	486.32	610.20
72	343.49	427.02	532.63	659.28
73	372.89	463.95	578.90	708.37
74	402.30	500.88	625.19	757.47
75	431.70	537.81	671.51	806.55
76	451.98	562.96	702.70	844.00
77	472.26	588.11	733.95	881.45
78	492.53	613.29	765.13	918.94
79	512.82	638.42	796.37	956.39
80	533.07	663.60	827.61	993.84
81	560.77	698.20	870.85	1045.97
82	588.48	732.85	914.10	1098.05
83	616.17	767.46	957.37	1150.18
84	643.88	802.08	1000.62	1202.28
85+	671.59	836.72	1043.89	1254.41

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	68.98	82.33	100.78	145.31
45-49	98.52	117.62	143.98	207.57
50	120.46	144.57	177.71	257.86
51	124.84	149.97	184.53	268.05
52	129.24	155.42	191.30	278.25
53	133.59	160.82	198.09	288.43
54	137.99	166.24	204.90	298.63
55	142.37	171.67	211.69	308.83
56	149.26	180.20	222.37	324.81
57	156.15	188.73	233.05	340.78
58	163.08	197.21	243.72	356.80
59	169.96	205.74	254.40	372.77
60	176.88	214.26	265.09	388.77
61	190.32	230.92	286.00	420.22
62	203.76	247.59	306.95	451.70
63	217.19	264.28	327.84	483.15
64	230.63	280.94	348.80	514.63
65	244.10	297.60	369.74	546.09
66	265.79	324.47	403.44	583.44
67	287.45	351.34	437.12	620.78
68	309.18	378.21	470.83	658.16
69	330.84	405.08	504.53	695.49
70	352.53	431.97	538.25	732.85
71	395.43	485.03	604.75	793.11
72	438.29	538.11	671.24	853.38
73	481.18	591.17	737.74	913.61
74	524.05	644.24	804.23	973.88
75	566.95	697.30	870.73	1034.14
76	591.53	727.51	908.26	1078.79
77	616.08	757.72	945.75	1123.42
78	640.66	787.94	983.29	1168.07
79	665.23	818.14	1020.82	1212.70
80	689.81	848.34	1058.35	1257.35
81	725.02	891.83	1112.69	1322.06
82	760.23	935.32	1167.00	1386.76
83	795.49	978.78	1221.32	1451.49
84	830.70	1022.29	1275.63	1516.20
85+	865.94	1065.77	1329.98	1580.91

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	38.91	46.06	55.37	73.23
45-49	55.57	65.79	79.10	104.65
50	69.70	83.43	101.16	135.33
51	72.88	87.42	106.17	142.31
52	76.05	91.41	111.16	149.33
53	79.20	95.39	116.20	156.33
54	82.39	99.38	121.20	163.34
55	85.55	103.37	126.20	170.33
56	90.96	110.12	134.67	182.19
57	96.37	116.90	143.17	194.06
58	101.76	123.67	151.68	205.92
59	107.18	130.44	160.15	217.79
60	112.59	137.20	168.65	229.65
61	123.08	150.36	185.21	252.87
62	133.56	163.55	201.79	276.10
63	144.04	176.73	218.35	299.38
64	154.52	189.92	234.93	322.59
65	165.01	203.08	251.49	345.82
66	182.89	225.57	279.73	376.35
67	200.81	248.04	308.00	406.91
68	218.71	270.56	336.22	437.47
69	236.61	293.03	364.45	467.99
70	254.52	315.50	392.70	498.55
71	283.39	351.75	438.14	547.74
72	312.23	388.00	483.56	596.92
73	341.12	424.22	528.99	646.12
74	369.96	460.45	574.41	695.31
75	398.85	496.69	619.86	744.46
76	421.41	524.72	654.67	786.27
77	443.96	552.76	689.52	828.10
78	466.56	580.79	724.33	869.87
79	489.12	608.87	759.16	911.69
80	511.69	636.89	794.01	953.49
81	541.00	673.50	839.79	1008.65
82	570.31	710.15	885.58	1063.81
83	599.65	746.79	931.39	1118.98
84	628.96	783.44	977.18	1174.14
85+	658.28	820.07	1022.96	1229.28

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	52.44	62.01	75.26	107.10
45-49	74.95	88.56	107.51	153.00
50	94.90	113.08	138.16	198.65
51	98.97	118.09	144.44	208.06
52	103.02	123.09	150.73	217.48
53	107.10	128.10	157.00	226.89
54	111.15	133.10	163.29	236.32
55	115.22	138.11	169.57	245.72
56	121.93	146.42	179.96	261.26
57	128.66	154.68	190.34	276.78
58	135.36	162.98	200.72	292.33
59	142.09	171.24	211.10	307.85
60	148.80	179.54	221.49	323.39
61	161.42	195.19	241.11	352.89
62	174.05	210.82	260.77	382.41
63	186.67	226.47	280.40	411.90
64	199.27	242.09	300.05	441.42
65	211.90	257.75	319.69	470.93
66	233.26	284.21	352.88	508.83
67	254.61	310.67	386.05	546.74
68	275.97	337.12	419.23	584.61
69	297.32	363.58	452.40	622.53
70	318.70	390.04	485.59	660.42
71	360.65	441.97	550.65	720.88
72	402.60	493.86	615.68	781.35
73	444.56	545.79	680.72	841.77
74	486.51	597.72	745.79	902.24
75	528.50	649.64	810.84	962.69
76	555.76	683.20	852.55	1012.36
77	583.03	716.76	894.29	1061.99
78	610.29	750.29	936.04	1111.66
79	637.59	783.84	977.78	1161.32
80	664.86	817.41	1019.51	1210.95
81	701.97	863.21	1076.75	1279.15
82	739.03	909.00	1133.97	1347.34
83	776.16	954.83	1191.22	1415.56
84	813.22	1000.62	1248.46	1483.75
85+	850.34	1046.45	1305.69	1551.94

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	41.73	48.31	57.16	75.83
45-49	59.65	69.02	81.63	108.28
50	75.58	88.73	106.22	143.46
51	78.72	92.60	111.12	150.49
52	81.87	96.50	116.02	157.49
53	85.03	100.43	120.91	164.53
54	88.11	104.31	125.81	171.59
55	91.25	108.23	130.71	178.61
56	97.11	115.48	139.78	191.65
57	102.93	122.76	148.85	204.68
58	108.79	129.95	157.94	217.71
59	114.65	137.23	167.01	230.75
60	120.48	144.48	176.12	243.78
61	131.81	158.62	193.86	269.41
62	143.14	172.75	211.65	295.00
63	154.45	186.90	229.39	320.66
64	165.78	201.03	247.18	346.31
65	177.12	215.16	264.92	371.93
66	198.28	241.59	298.08	409.75
67	219.49	267.98	331.22	447.55
68	240.64	294.41	364.35	485.36
69	261.81	320.80	397.47	523.13
70	283.02	347.23	430.62	560.95
71	321.73	395.42	490.97	623.52
72	360.42	443.64	551.34	685.99
73	399.13	491.83	611.66	748.53
74	437.82	540.03	672.02	811.05
75	476.53	588.18	732.36	873.55
76	512.45	632.64	787.63	939.61
77	548.40	677.08	842.89	1005.65
78	584.33	721.52	898.16	1071.75
79	620.28	765.96	953.40	1137.77
80	656.22	810.40	1008.67	1203.84
81	704.91	870.92	1084.36	1294.53
82	753.59	931.44	1160.01	1385.20
83	802.27	991.94	1235.69	1475.91
84	850.92	1052.46	1311.34	1566.60
85+	899.60	1113.02	1387.03	1657.29

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	49.56	57.51	68.60	95.22
45-49	70.78	82.16	97.99	136.00
50	90.66	106.43	128.37	181.06
51	94.35	110.97	134.04	189.56
52	97.99	115.51	139.71	198.02
53	101.70	120.04	145.41	206.51
54	105.38	124.56	151.08	215.00
55	109.07	129.10	156.77	223.51
56	115.80	137.37	167.12	238.98
57	122.51	145.66	177.49	254.40
58	129.25	153.93	187.84	269.89
59	135.99	162.18	198.21	285.34
60	142.69	170.49	208.56	300.77
61	155.42	186.21	228.31	330.47
62	168.16	201.96	248.06	360.14
63	180.84	217.71	267.84	389.82
64	193.58	233.46	287.60	419.51
65	206.30	249.18	307.35	449.19
66	229.82	278.34	343.90	492.11
67	253.38	307.47	380.42	535.04
68	276.90	336.58	416.96	577.96
69	300.46	365.74	453.46	620.90
70	324.01	394.86	490.01	663.79
71	371.42	453.53	563.40	734.25
72	418.85	512.14	636.81	804.66
73	466.29	570.74	710.24	875.13
74	513.69	629.41	783.64	945.56
75	561.14	688.02	857.03	1016.02
76	601.37	737.54	918.61	1089.22
77	641.64	786.98	980.15	1162.49
78	681.85	836.50	1041.76	1235.73
79	722.10	885.98	1103.33	1308.99
80	762.34	935.48	1164.91	1382.23
81	817.86	1004.09	1250.68	1484.44
82	873.43	1072.70	1336.46	1586.63
83	928.97	1141.32	1422.20	1688.84
84	984.54	1209.92	1507.99	1791.03
85+	1040.06	1278.53	1593.77	1893.25

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	73.96	88.75	107.97	146.40
45-49	105.64	126.77	154.24	209.19
50	128.05	154.80	189.36	258.20
51	132.96	160.95	197.13	269.06
52	137.86	167.11	204.85	279.91
53	142.78	173.28	212.55	290.76
54	147.65	179.43	220.32	301.65
55	152.56	185.58	228.03	312.51
56	160.41	195.40	240.40	329.82
57	168.32	205.28	252.75	347.12
58	176.16	215.14	265.16	364.48
59	184.02	225.02	277.50	381.79
60	191.91	234.88	289.88	399.10
61	207.69	254.67	314.82	434.12
62	223.47	274.52	339.74	469.19
63	239.24	294.31	364.66	504.20
64	255.02	314.18	389.62	539.27
65	270.80	333.97	414.55	574.29
66	296.34	366.05	454.81	616.56
67	321.88	398.16	495.14	658.79
68	347.40	430.23	535.43	701.04
69	372.93	462.34	575.71	743.28
70	398.51	494.42	616.00	785.54
71	439.68	546.13	680.80	854.22
72	480.85	597.79	745.63	922.93
73	522.01	649.48	810.40	991.65
74	563.18	701.18	875.20	1060.38
75	604.34	752.88	940.05	1129.09
76	632.73	788.09	983.71	1181.52
77	661.12	823.30	1027.46	1233.94
78	689.49	858.54	1071.11	1286.42
79	717.90	893.72	1114.84	1338.85
80	746.24	928.97	1158.57	1391.28
81	785.02	977.41	1219.10	1464.25
82	823.81	1025.92	1279.65	1537.16
83	862.58	1074.37	1340.22	1610.14
84	901.37	1122.83	1400.77	1683.07
85+	940.16	1171.32	1461.34	1756.05

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	96.57	115.25	141.08	203.42
45-49	137.92	164.66	201.56	290.58
50	168.63	202.38	248.78	360.98
51	174.76	209.94	258.32	375.24
52	180.92	217.57	267.80	389.52
53	187.01	225.13	277.31	403.77
54	193.17	232.72	286.84	418.05
55	199.30	240.32	296.34	432.33
56	208.95	252.26	311.30	454.70
57	218.59	264.20	326.25	477.06
58	228.30	276.07	341.18	499.48
59	237.93	288.02	356.13	521.84
60	247.61	299.94	371.10	544.24
61	266.43	323.26	400.37	588.27
62	285.24	346.60	429.70	632.33
63	304.04	369.97	458.94	676.36
64	322.86	393.29	488.29	720.43
65	341.72	416.61	517.60	764.47
66	372.08	454.23	564.78	816.76
67	402.40	491.84	611.92	869.03
68	432.82	529.46	659.11	921.36
69	463.14	567.07	706.29	973.62
70	493.51	604.71	753.50	1025.92
71	553.56	678.99	846.59	1110.27
72	613.56	753.30	939.67	1194.65
73	673.60	827.58	1032.76	1278.96
74	733.62	901.87	1125.84	1363.33
75	793.67	976.15	1218.93	1447.69
76	828.08	1018.44	1271.47	1510.20
77	862.45	1060.73	1323.96	1572.68
78	896.86	1103.04	1376.51	1635.18
79	931.26	1145.31	1429.05	1697.66
80	965.67	1187.59	1481.58	1760.16
81	1014.96	1248.47	1557.65	1850.75
82	1064.25	1309.35	1633.68	1941.33
83	1113.61	1370.19	1709.73	2031.94
84	1162.90	1431.10	1785.75	2122.53
85+	1212.23	1491.97	1861.84	2213.12

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan: 50% Home Care
5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	54.47	64.48	77.51	102.51
45-49	77.79	92.10	110.73	146.50
50	97.57	116.79	141.61	189.45
51	102.02	122.38	148.63	199.22
52	106.46	127.96	155.61	209.05
53	110.87	133.54	162.67	218.85
54	115.34	139.12	169.67	228.66
55	119.76	144.71	176.67	238.44
56	127.33	154.16	188.52	255.05
57	134.91	163.65	200.42	271.66
58	142.45	173.13	212.34	288.27
59	150.04	182.60	224.19	304.88
60	157.61	192.07	236.09	321.49
61	172.30	210.49	259.28	353.99
62	186.97	228.95	282.49	386.51
63	201.64	247.40	305.67	419.10
64	216.31	265.87	328.88	451.59
65	231.00	284.29	352.06	484.11
66	256.03	315.78	391.59	526.85
67	281.11	347.23	431.17	569.63
68	306.17	378.76	470.67	612.41
69	331.23	410.21	510.19	655.14
70	356.30	441.67	549.74	697.92
71	396.72	492.41	613.35	766.78
72	437.09	543.16	676.94	835.63
73	477.53	593.87	740.53	904.50
74	517.91	644.58	804.12	973.36
75	558.35	695.32	867.74	1042.17
76	589.93	734.56	916.47	1100.70
77	621.50	773.81	965.26	1159.26
78	653.14	813.05	1013.99	1217.73
79	684.72	852.36	1062.75	1276.27
80	716.31	891.58	1111.53	1334.79
81	757.35	942.83	1175.62	1412.01
82	798.38	994.14	1239.72	1489.23
83	839.45	1045.43	1303.85	1566.46
84	880.48	1096.74	1367.95	1643.68
85+	921.53	1148.02	1432.04	1720.87

Catholic Order of Foresters
Rates per \$10 Daily Benefit
90 Day Elimination Period
Base Plan Plus Home Health Care Rider (FCHHIR 2000)
5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	73.41	86.81	105.36	149.93
45-49	104.92	123.98	150.50	214.18
50	132.85	158.30	193.41	278.09
51	138.55	165.31	202.20	291.26
52	144.22	172.31	211.01	304.45
53	149.93	179.33	219.78	317.62
54	155.60	186.33	228.59	330.82
55	161.30	193.34	237.38	343.98
56	170.69	204.97	251.93	365.74
57	180.11	216.54	266.46	387.46
58	189.49	228.16	280.99	409.23
59	198.91	239.72	295.52	430.96
60	208.31	251.34	310.06	452.71
61	225.97	273.25	337.53	494.01
62	243.65	295.13	365.05	535.34
63	261.32	317.04	392.53	576.62
64	278.96	338.90	420.04	617.94
65	296.64	360.82	447.53	659.25
66	326.54	397.87	494.00	712.31
67	356.43	434.91	540.43	765.38
68	386.33	471.93	586.88	818.40
69	416.22	508.98	633.31	871.48
70	446.15	546.02	679.78	924.52
71	504.87	618.71	770.85	1009.16
72	563.60	691.35	861.89	1093.81
73	622.34	764.05	952.94	1178.39
74	681.07	836.75	1044.03	1263.05
75	739.85	909.43	1135.09	1347.67
76	778.01	956.41	1193.48	1417.20
77	816.18	1003.39	1251.92	1486.68
78	854.34	1050.33	1310.36	1556.21
79	892.56	1097.30	1368.79	1625.73
80	930.74	1144.29	1427.21	1695.21
81	982.69	1208.41	1507.34	1790.68
82	1034.57	1272.51	1587.44	1886.14
83	1086.55	1336.67	1667.59	1981.64
84	1138.43	1400.77	1747.72	2077.10
85+	1190.39	1464.93	1827.84	2172.56

Policy Form Number FCLTC-PA 2000

Premium Adjustment Factors Attributable
to Increasing Elimination Periods

Days in Elimination Period			
<u>20</u>	<u>60</u>	<u>90</u>	<u>180</u>
1.15	1.07	1.00	0.90

Policy Form Number FCLTC-PA 2000

Premium Adjustment Factors Attributable to Optional Riders

Issue Age	FCSWP 2000 Spousal Waiver of Premium	FCSSP 2000 Survivor Spouse Paid-Up	FCROP 2000 Return of Premium	FCNFBR 2000 Nonforfeiture Benefit
18-39	0.01	0.12	1.08	1.20
40-49	0.01	0.12	1.08	1.19
50-54	0.01	0.12	1.08	1.17
55	0.02	0.12	1.12	1.17
56-59	0.02	0.11	1.12	1.17
60-64	0.02	0.11	1.12	1.15
65	0.03	0.11	1.14	1.15
66-69	0.03	0.09	1.14	1.15
70	0.04	0.07	1.15	1.13
71	0.04	0.07	1.18	1.13
72	0.04	0.07	1.21	1.13
73	0.04	0.07	1.23	1.13
74	0.04	0.07	1.26	1.13
75	0.06	0.06	1.29	1.13
76	0.06	0.06	1.31	1.13
77	0.06	0.06	1.34	1.13
78	0.06	0.06	1.36	1.13
79	0.06	0.06	1.39	1.13
>=80	0.11	0.04	1.41	1.11

Discounts

Spousal Discount	15%
Preferred Discount	10%

Benefit Period	FCROB 2000 Restoration of Benefit	FCSSB 2000 Spousal Shared Benefit
2 Years	1.08	N/A
3 Years	1.05	0.12
5 Years	1.04	0.08
Lifetime	N/A	N/A

Premium Calculation Example

$$A = \begin{array}{l} \text{Annual Base Premium} \\ \text{Base Premium based upon possible choice of:} \\ \text{Home Health Care Increase Rider and/or} \\ \text{Simple Inflation Protection Rider and/or} \\ \text{Compound Inflation Protection Rider} \\ * \\ \text{Elimination Period Factor} \end{array}$$

$$B = \begin{array}{l} A * \text{Survivor Spouse Paid-Up Factor} \\ \text{(if chosen by Insured)} \\ + \\ A * \text{Spousal Shared Benefit Factor} \\ \text{(if chosen by Insured)} \\ + \\ A * \text{Spousal Waiver of Premium Factor} \\ \text{(if chosen by Insured)} \end{array}$$

$$C = \begin{array}{l} (A + B) * \text{Restoration of Benefit Factor} \\ \text{(if chosen by Insured)} \\ * \\ \text{Nonforfeiture Benefit Factor or} \\ \text{Return of Premium Factor} \\ \text{(if chosen by Insured)} \end{array}$$

$$C = \text{Total Gross Premium}$$